

SERVICE WORK ORDER

DATE WORK IS TO BE PERFORMED: _____

PURCHASE OR RENTAL (rental/lease property requires a \$50.00 deposit to establish service)

LANDLORD/PREVIOUS OWNER _____ PHONE # (____) _____ - _____

SERVICE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SUBDIVISION: _____ LOT # _____

CUSTOMER NAME: _____ SPOUSE OR ROOMMATE: _____

HAS ANYONE IN THE HOUSEHOLD PREVIOUSLY BEEN A UNION COUNTY CUSTOMER? YES NO

IF SO, WHAT ADDRESS? _____

SS# _____ SS# _____

DOB: _____ DOB: _____

DL # _____ - _____ DL # _____ - _____

PHONE# (____) _____ - _____ PHONE# (____) _____ - _____

WORK # (____) _____ - _____ WORK # (____) _____ - _____

MAILING/FORWARDING ADDRESS (if different from above)

CITY _____ STATE _____ ZIP _____ PHONE # (____) _____ - _____

THE \$25.00 NEW ACCOUNT FEE WILL BE BILLED ON THE FIRST BILL

****For Office Use Only****

WAS RENTAL DEPOSIT COLLECTED? YES NO

MASTER # _____ CUST # _____

READ OUT _____ CUT ON _____ CUT OFF _____ SET METER _____

BOOK # _____ DISTRICT: _____ PHASE: _____ MAP: _____ BLOCK: _____ SECT: _____

****Mail to: Union County Public Works, 400 North Church Street, Monroe NC 28112****

NORTH CAROLINA GUIDELINES

(Please check any that pertain)

RESIDENCE/COMMERCIAL

Will this location have any of the following:

___ Fire sprinkler system

___ Booster pump or chemical additives (Model FRP II)

___ Lawn sprinkler systems

___ Any chemical injection(s) or booster pump? (Model FRP II)

___ Any connection to tanks, lines and vessels that handle non-toxic substances

___ Automatic service stations (with no car wash), bakeries, beauty shops with no health hazard and bottling plants with no back pressure

MODEL FRP II -- REQUIRED

___ Swimming Pools

___ Connection to an unapproved water system or unapproved auxiliary water supply

___ Connection to tanks, pumps, lines, steam boilers or vessels that handle sewage, lethal substances, toxic or radioactive substances.

___ Hospital and other medical facilities or morgues, mortuaries and autopsy facilities

___ Metal plating facility or Dye Works

___ Laundries or Car Wash

___ Bottling plants (subject to back pressure)

___ Canneries or Dairies

___ Exterminators and lawn care companies

___ Battery manufacturers

___ Chemical processing plants

___ Film Laboratories

___ Five or more stories building

___ Water front facilities

CUSTOMER: _____

DATE: _____

C/S Staff: _____