



Town of Liberty
 Phone: (336) 622-4276
 Fax: (336) 622-2665

Email: townhall@townoflibertync.org

Welcome to Liberty !

TO BE COMPLETED BY TOWN HALL

Completed By: _____

Amount Paid: _____

Date: _____

Rt/Sequence: _____

Water **Sewer** **Irrigation** **Trash**

Deposit Amount: \$ _____

WATER/SEWER SERVICE APPLICATION

APPLICANT INFORMATION

Applicant's Name: _____

SSN / Fed ID#: _____ Driver License #: _____ State: _____

Service Address (Not PO Box): _____ Liberty, NC 27298

Mailing Address (If Different): _____

City: _____ State: _____ Zip Code: _____

Nighttime Phone Number: (____) _____ - _____ Daytime Phone Number: (____) _____ - _____

Cell Phone Number: (____) _____ - _____ Email: _____

Employer Name/Address: _____
 _____ Employer Phone: (____) _____ - _____

IF YOU ARE NOT THE OWNER OF THIS PROPERTY, PLEASE PROVIDE THE FOLLOWING INFORMATION:

Owner/Landlord: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Copy of Applicant Rental Agreement Closing Document / Deed (ownership)

Please indicate: Residential Commercial Institutional Industrial

Date Service Connection Requested: _____

Applicant Please Read & Sign

I, the undersigned, understand that pursuant to the authority granted to the Town of Liberty in **Chapter 50 Section 03** of the Town's Code of Ordinances and the most recent adopted version of the Utility Service Policy that the town has the right to terminate service if I have not paid my account in full by the date specified on the utility bill.

I hereby make application for water, sewer, and garbage services as indicated at the premises indicated. I agree to comply with the applicable ordinances and policies of the Town of Liberty regarding the provision of utility services, including those relating to deposits and other charges. I understand that the information furnished on this application will be verified, and if determined inaccurate, will result in the termination of service without prior notice.

By providing your social security number it will be used to facilitate collection of water, sewer, garbage, and property taxes or any other bills in the event you do not pay the bill voluntarily. Using the provided social security number will also allow the Town to claim payment on any unpaid bill from the NC Debt Setoff Program and or other collection methods necessary to satisfy any unpaid debt.

In accordance with Federal civil rights law, this institution is prohibited from discriminating based on race, color, national origin, age, disability, religion, sex, familial status, sexual orientation or reprisal.

Applicant's Signature: _____ Date: _____