NATCHEZ WATER WORKS

150 N. SHIELDS LANE P.O. BOX 1325 NATCHEZ, MISSISSIPPI 39120

APPLICATION FOR WATER/SEWER SERVICE

Date of Application:				
Name:		E911 Number (Required)		
		CALL 601-445	-2266 TO OBTAIN E911 NU	JMBER
	(Check All That Apply)			
Residential	Business	/ Tenant	Owner L	andlord
Address Where Turning	On Service			
Mailing Address If Differe	ent			
Telephone Number		_ SSN / Tax ID No	o. / Other	
Employment or Source o	f Income			
Employers Phone Number	er			
Name of Landlord Where	Moving To			
Landlord's Telephone Nu	ımber			
Previous Address Where	Moving From			
2 Name and Social Securit For Business Servic 1	y Number of Other Persons 1	8 Years of Age or C Number of Two Re	Ider Living or Staying a	
Please Read and Sign: I, Print Matchez Water Work		y that the above info arbage charges and	rmation provided by m any applicable fees in a	e is true and correct. I agree to agreement. It is agreed that the eing followed.
Date	Signature of Accou	unt Holder	Sign Name	
		ription Service (Op	tional):	below;
Email:		Mobile:		Carrier:
For Office Use Only:				
ACCT#	DEP#	_ Rec'd By		(Cash / Check)
Service Turn-On Date				