

140 S. MAIN STREET POST OFFICE BOX 151 TONOPAH, NEVADA 89049 PHONE (775) 482-6643 FAX (775) 482-3778 TDD: 711

# Residential Water & Sewer Application for Service

Application Date:	Service Start Date:		
Do you own the property o	L OR LEGAL DESCRIPTION:  are you renting/leasing (please check the applicable box)  y of a rental agreement or other acceptable proof he/she is authorized to occupy the residence and start utility serv		
	C marily		
	E-mail:		
	Employer's Phone:		
Co-Applicant Information (	f applicable)		
Full Name:			
Mailing Address:			
City/State/Zip:			
Phone:	E-mail:		
Employer:	Employer's Phone:		
Employer's Address:			
Does the applicant or co-	applicant currently have account with TPU?  Yes  No		
f you answered no, have	you had an account with TPU in the past 12 mths?  Yes  No		
	TPU USE ONLY		
Meter #:	Account #: Work Order No Date Rcvd: Rcvd by:		
	Co-Applicant ID:		
Security Deposit Amt:	Security Deposit #: Transfer Deposit from Acct:		

## **Deposits**

Residential customers are required to pay a \$75.00 security deposit prior to receiving service. Deposits may be waived at the discretion of the Account Supervisor or Administrative Manager.

### **New Account Fees**

A new account processing fee of \$10.00 for water and \$10.00 for sewer will be applied to the customer's first bill.

### **Connection & Disconnection Fees**

In the event the customer requests a non-emergency service connection or disconnection between the hours of 3:00 p.m. and 7:00 a.m. on a regular business day or anytime on Saturday, Sunday or Holidays, the customer will be charged a \$50.00 call out fee.

## **Payment of Bills**

Delinquency and penalties; billings which are not paid on or before the due date shall be considered delinquent. Delinquent bills shall be subject to a penalty of 10% of the amount due and added to the billing. Accounts 60 days or more past due are subject to termination unless acceptable payment arrangements are made with this office prior to termination. Failure to comply with a payment arrangement may result in termination of service. In the event service is disconnected for nonpayment the account will be assessed an additional \$25.00 disconnect fee. Restoration of terminated service requires payment in full of all past due charges, penalties, and fees.

### **Returned Checks**

A fee of \$42.00 shall be charged for all returned checks.

## **Terms**

Applicant agrees to comply with the provisions of the Town of Tonopah – Tonopah Public Utilities Water, Sewer and Reclaimed Water Regulations and all applicable State and Federal regulations regarding the use of the service for which he/she has applied.

In accordance with NAC 489.400 to 489.416, newly placed or relocated manufactured homes require a certificate of installation and matching label. Applicant shall provide the Utility with the certification and matching label. Services will not be provided to an applicant who has a newly installed or relocated manufactured home until the Utility has verified the required certification and matching label.

The Utility shall not be responsible for damage to property caused by faucets, valves and other equipment that are open when water is turned on at the meter either originally or when turned on after a temporary shut-down.

Pursuant to the Town of Tonopah-Tonopah Public Utilities Water, Sewer and Reclaimed Water Regulations §6.1.3, five years after the Utility determines that a service is abandoned, deserted, inactive or removed, the ERU(s) associated with such service will be considered no longer valid and revert to the Utility.

I understand and agree that if my account must be referred to a third party for collections, I will be responsible for any, and all costs related to the collection action, including but not limited to collection fees, court costs and reasonable attorney fees.

Applicant Signature	Date
Co-Applicant Signature (if applicable)	Date

The Town of Tonopah – Tonopah Public Utilities is an equal opportunity provider and employer. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at:

## **How to File a Program Discrimination Complaint**

http://www.ascr.usda.gov/complaint\_filing\_cust.html

and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by mail:

U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, DC 20250-9410

Fax: (202) 690-7442; or E-mail: <a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a>

The following information is required by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish this information, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

To be completed by Applicant:	Ethnicity:	Hispanic or Latino	
(Please Check one in each Category)		Not Hispanic or Latino	
	Race:	Alaska Native American Indian Asian Black/African American Native Hawaiian or Other Pacific Islander	
		White	
	Sex:	Male Female	
I, do not wish to furnish this	s information.	e e	
Applicant declined to furnish this in	formation, identif	ication was made by:	
Sur	name	Visual Observation	

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