



Northeast Alabama Water (NEAW)
PO Box 681359, Fort Payne, AL 35968

PHONE: 256-845-6186

WEBSITE: www.neawater.com

FAX: 256-845-7621

PAY BY PHONE: 855-984-1197

BILLING RATES:

- **3/4 INCH METER 0 - 2000 GALLONS - \$24.05 MINIMUM**
- **2 INCH METER 0 - 20,000 GALLONS - \$102.44 MINIMUM**

PAYMENT OPTIONS:

- IN OFFICE
- ONLINE
- BY PHONE
- BANK DRAFT
- GERALDINE TOWN HALL
- NIGHT DEPOSIT
- MAIL

YOU WILL RECEIVE A MINIMUM BILL EVEN IF YOU'RE NOT USING WATER

***EXPECT 2 TO 3 BUSINESS DAYS FOR SERVICES TO BE TURNED ON FOR REGULAR AND NONPAYMENT RECONNECTS**

***PHONE NUMBERS MUST BE KEPT CURRENT IN ORDER TO ASSIST YOU BETTER.**

CUSTOMER RESPONSIBILITIES

*The CUSTOMER shall be responsible for installing and maintaining a pressure regulator valve (PRV) and a cutoff valve on their line. The meter and related components (check valve, cutoff, etc...) serving the CUSTOMER's service shall remain the property of NEAW and shall not be used by the customer. Tampering with said meter/attachments may involve service being discontinued without notice. If a request is made to have the service left off at the meter, the CUSTOMER is still responsible to have their cutoff valve in the off position.

*Services provided by NEAW shall be supplied only to the applicant at the meter number in this contract. Customer shall not connect any other dwelling or property to the water service.

*NEAW shall have the right to restrict, control or discontinue service at any time during emergencies or repairs. NEAW shall not be liable for failure to furnish service for any reason beyond its control or for any loss, injury or damage to persons, plumbing or property resulting from such service discontinuance.

*To protect the overall system from being contaminated CUSTOMER agrees not to allow any cross-connection between NEAW service and a private well or any connection. If cross-connection takes place, service may be discontinued without notice.

*Failure to receive your bill will not relieve any payment obligation. Any unpaid balance will be subject to disconnection at any time; if not paid 5 days of the due date.

*NEAW reserve the right to discontinue water service at any time for failure to follow the rules and regulations.

CUSTOMER COPY

Northeast Alabama Water (NEAW)

MAILING ADDRESS
P.O. BOX 681359
FORT PAYNE, AL 35968



PHYSICAL ADDRESS
2416 BECK INDUSTRIAL BLVD
FORT PAYNE, AL 35968

PHONE: (256)845-6186

FAX: (256)845-7621

WEBSITE: www.neawater.com

REQUIRMENTS FOR SERVICE

*Debit/Credit cards are not accepted for reconnect, transfer, or set meter.

RECONNECTS- To turn on existing meter, you will need to provide the following:

- ALABAMA ID • SOCIAL SECURITY CARD • METER NUMBER
- DEED IF YOU OWN THE PROPERTY • NOTARIZED RENTAL FORM IF YOU RENT PROPERTY
- \$100.00 DEPOSIT AND \$25.00 SERVICE CHARGE

TRANSFER- To transfer your existing service, you will need the following:

- ALABAMA ID • SOCIAL SECURITY CARD • METER NUMBER
- DEED IF YOU OWN THE PROPERTY • NOTARIZED RENTAL FORM IF YOU RENT PROPERTY
- \$25.00 TRANSFER FEE AND BRING CURRENT ACCOUNT TO BALANCE OF ZERO
- RAISE DEPOSIT IF NEEDED

SET METER- To have a meter set, you will need the following:

- ALABAMA ID • SOCIAL SECURITY CARD • NEIGHBOR'S METER NUMBER
- DEED IF YOU OWN THE PROPERTY • NOTARIZED RENTAL FORM IF YOU RENT PROPERTY
 - ❖ ¾ INCH - \$600.00
 - ❖ 1 INCH - \$850.00
 - ❖ 2 INCH - \$2600.00

DISCONNECTING- If you are needing to discontinue your service the account holder must contact office with account number and verify service. Please have the new billing address to update account, so you will receive the final bill and refund.



NORTHEAST ALABAMA WATER
APPLICANT INFORMATION
 PO BOX 681359, FORT PAYNE, AL 35968

METER # _____ DATE _____

FULL NAME _____ **MAILING ADDRESS** _____

Applicant _____
City State Zip

FULL NAME _____ **SERVICE ADDRESS** _____

Spouse _____
(Include Maiden Name) City State Zip

SOCIAL SECURITY NUMBER _____ **TELEPHONE()** _____

Applicant _____
 Spouse _____

Have you had water with us before? _____
 If yes, year and location _____

DATE OF BIRTH _____

Applicant _____ Spouse _____

Do you rent _____ or own _____ property?
 If you rent, who owns? _____

DRIVERS LICENSE NUMBER _____

Applicant _____

Applicant's Employer & Address _____

Spouse _____

Names of children and other adults living in your house _____

MARITAL STATUS: Single () Married () Widowed ()

Separated () Divorced () Date Divorced _____

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BY SIGNING THIS APPLICATION, CUSTOMER IS STATING THAT THE ABOVE APPLICATION IS CORRECT AND ALL CUSTOMER RESPONSIBILITIES HAVE BEEN READ AND AGREED UPON.

APPLICANT'S SIGNATURE _____ DATE _____

SPOUSE'S SIGNATURE _____ DATE _____