

BUSINESS APPLICATION – TOWN OF BRASELTON UTILITIES DEPT
 4986 Highway 53, P.O. Box 306 Braselton, GA 30517 Phone: 706-654-3915 Fax: 706-654-9100

Services Applied For (check all that apply): Water Sewer Reuse

A deposit is required for service. Deposit amounts can be paid via cash, check, or money order or can be included on the first month's bill. The Town reserves the right to collect any outstanding utility bills or business taxes/licenses owed to the Town by the applicant and payment of the deposit before the new service is established. Applicants with Town accounts in good standing may have their existing deposit(s) transferred.

Meter Size	Inside Town Limits			Outside Town Limits	
	Water	Sewer	Reuse	Water	Sewer
3/4"	\$65.00	\$70.00	\$35.00	\$75.00	N/A
1"	\$120.00	\$140.00	N/A	\$130.00	N/A

Deposits for larger meters shall be the Public Works Director's estimate of 2 months of actual projected usage for that particular customer.

Three (3) days notice must be given in writing or in person to connect or disconnect service. Application must be filled out completely, accurately and legibly (including property owner information) in order to establish your account and you must be at least 18 years old. You may be required to provide a copy of your lease agreement, purchase agreement or picture ID. Customers must insure all inside plumbing is shut off. Any damages as a result of open faucets or leaks inside the building are the customer's responsibility. Any applications faxed after 5PM will be processed the next business day. (Weekends and Holidays are not included.) Only authorized personnel are allowed inside the meter box. If someone other than a city employee damages the meter box or its contents, the customer of record will be responsible. Any maintenance, turn ons, turn offs, or rereads will be done per customer request or during regular maintenance and reading schedules. Charges for rereads and meter testing may apply.

Business Name _____
 Type of Business (retail, restaurant, bank, etc) _____
 Tax Identification Number _____ Contact Person: _____
 Contact Number Business () _____ Emergency # () _____

Service Address _____
 City _____ State _____ Zip Code _____
 Occupancy Date _____ Date you desire water service _____
 Mailing Address (if different) _____
 City _____ State _____ Zip Code _____

Owner of Company or Manager in Charge _____
 Address _____ Email Address _____
 City _____ State _____ Zip Code _____ Date of Birth _____
 Social Security Number _____ Driver's License Number _____ State _____

Property Owner Name (if other than applicant) _____
 Property Owner's Address _____
 City _____ State _____ Zip Code _____

Have you ever had services with the Town of Braselton before? Yes _____ No _____ If so, when and where? _____

Do you need a disconnect at a current address? Yes _____ No _____ Date of disconnect _____
 Address (if different from above) _____

In applying for service, I verify that to the best of my knowledge the above information is correct. My signature indicates I have read all the above information. I understand that providing false information may result in the rejection of my application or disconnection of services at a later date.

Signature _____ Date: _____

For Office Use Only:
 Account Number _____ Information verified by _____
 Previous account number (if applicable) _____
 Water Deposit _____ Sewer Deposit _____ Reuse Deposit _____
 Reuse Agreement Received by _____ Date: _____

Note: An application for reuse water service requires the execution of a separate agreement, which must be attached to this application.

