



City of Pickens
 219 Pendleton Street
 P.O. Box 217
 Pickens, SC 29671
 864-878-6421
 www.cityofpickens.com

Residential Water Service Application

Account Holder Information

| | | |
|--|---|---|
| First Name | Middle Name | Last Name |
| Social Security Number | Phone (Home) | Phone (Cell) |
| Date of Birth | Email Address | |
| Sex* <input type="checkbox"/> Male <input type="checkbox"/> Female | Race* <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Asian | <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Hispanic/Latino |
| Emergency Contact Name | | Emergency Contact Phone |
| NOTES: City Staff Must Make a Copy of the Account Holder's Driver's License or State ID Card As Part of the Application Process; If Application is Mailed to City Hall, Applicant Must Submit a Copy of Their Driver's License or State ID Card With This Application. Sex & Race Information is Required in Compliance With U.S. Dept. of Agriculture Rural Development. | | |

Address Information

| | |
|--|--|
| Service Address (For New or Transferred Service) | |
| Is Water Being Transferred from Another Address? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, List Address Where Water is Being Transferred From | |
| Mailing Address for Water Bills | <input type="checkbox"/> Check Here if Mailing Address is Same as Service Address |
| What Date Do You Want Water Turned On? | NOTE: Staff members will only turn on water if the customer is present at the location to check for leaks or overflows. If the customer cannot be present, they must sign an Authorization to Turn on Water Service Waiver & Release of Liability form. |

Water Service Information

| | |
|---|---|
| Do You Own the Property? <input type="checkbox"/> Yes <input type="checkbox"/> No | NOTE: The Connection Fee is \$30.00. A refundable \$100 Deposit is required, refundable after the last bill is paid. Property owners can be exempted from the \$100 Deposit with proof of ownership (closing statement, property tax receipt, deed/title). |
| If service is for a mobile home, do you own the property where this mobile home is located? <input type="checkbox"/> Yes <input type="checkbox"/> No | NOTE: If you own the mobile home but do not own the property, you must pay the deposit. |
| Do You Have a Critical Need for Water (For Example, Oxygen Machine)? If so, Briefly Explain. <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| By signing the application for water, sewer, and sanitation service, the applicant agrees to pay all costs of collection of the applicant's unpaid bills. The City of Pickens has the right pursuant to the South Carolina Setoff Debt Collection Act to collect any sum due and owed by the applicant through the offset of the applicant's state income tax refund. If the City of Pickens chooses to pursue debts owed by the applicant through the Setoff Debt Collection Act, the applicant agrees to pay all fees and costs incurred through the setoff process, including fees charged by the Department of Revenue, the Municipal Association of South Carolina, and the City of Pickens. If the City of Pickens chooses to pursue debts in a manner other than setoff, the applicant agrees to pay the costs and fees associated with the selected manner as well. | |
| Signature _____ | Today's Date _____ |

For Office Use Only

| | | |
|--------------------------|----------------------|----------------------|
| Sex _____ | Race _____ | Deposit _____ |
| Inside _____ | Outside _____ | Connection Fee _____ |
| Previous Account # _____ | Fixed Services _____ | |
| New Account # _____ | Final Reading _____ | |



**AUTHORIZATION
TO TURN ON WATER SERVICE
WAIVER AND RELEASE OF LIABILITY**

| | |
|----------------------|------------------------------|
| Property Owner Name: | Tenant Name (If applicable): |
| Service Address: | Daytime Phone: |
| Account Number: | e-mail: |

I, the undersigned understand that it is the City of Pickens' policy to turn on water service only when the customer is present.

I am unable to be present when the water service is turned on and I request and authorize the City of Pickens to turn water service on without my presence at the property listed above on or after

_____ (time)

_____ (date)

I will ensure that all water connections served under the above referenced account at this property are properly closed, including but not limited to, all interior and exterior water faucets, sinks, tubs, showers and toilets and any and all such connections within all residential and/or commercial units served under the above account.

I understand that the City of Pickens will not assume, responsibility for any leaks or overflows of fixtures or appliances or any damage resulting from any such leaks or overflows.

In order to have water service turned on without being present, I agree to waive any claims of liability toward the City of Pickens and agree to hold the City and its employees harmless should any water damage occur at this property due to my/our decision to opt out of the City's normal water turn-on procedures.

Furthermore, I agree that the City of Pickens and their employees shall not be held responsible or liable for any injury, damage, or loss in any case whatsoever to the undersigned as a customer for merchandise, property, personnel or for lost income from water service turn-on in my absence.

I have read this WAIVER AND RELEASE, and fully understand its provisions. I acknowledge that I am the legal owner of the above identified premises and that I am signing this document of my own free and voluntary act, without any duress, coercion or threats by any person. I also declare that no other person's consent is necessary to authorize the execution of the WAIVER AND RELEASE.

Legal Owner/
Account Holder
Signature _____

(if applicable)
Tenant/
Account Holder
Signature _____

Legal Owner/
Account Holder
Printed Name _____

(if applicable)
Tenant/
Account Holder
Printed Name _____

Date Signed _____