

OLD RIVER WATER ASSN., INC.
INSTALLATION & JOB SHEET

Date_____ Acct#_____ Seq#_____ Meter#_____

Size_____ Meter Reading_____ Lat_____ Long_____

Well#_____ Route#_____ Commercial_____ Telephone#_____

Name_____ SS#_____

Members Name_____

Mailing Address_____ City & State_____

Service Address-E-911#_____ Zip_____

Farm_____ Camp_____ Residence_____ Church_____ Business_____ FireDept_____ Other_____

Available History_____

#Units__ Occupants__ Rate Code#__ Private Well__ Swimming Pool__ Other__

Property Owner_____ Rent/Lease: YES__ NO__

Right of Way Easement_____ Water User's Agreement_____ Notice of Intent_____

New Installation_____ Old Installation_____ Extra Installation_____ Supplies_____

New Member_____ Old Member_____ Meter Transfer_____ Name Transfer_____

Deposit Amount_____ Member_____ Check#_____ Cash_____

Bank Draft_____ Fire Dept. Donation_____ Starting Date_____ Membership #_____