



## Salem Water Department Application

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Location of Premises to be served: \_\_\_\_\_

\_\_\_\_\_ Lot# \_\_\_\_\_ Subdivision: \_\_\_\_\_

Name of former occupant: \_\_\_\_\_

Are you the owner? \_\_\_\_\_ renter? \_\_\_\_\_

Owner of property where will the meter be installed?

\_\_\_\_\_

Are you going to irrigate? \_\_\_\_\_ **\*\*\*if so, see attachment\*\*\***

**\*\*\*Owners are responsible for having a backflow device installed and it is the owner's responsibility to do a backflow test once a year\*\*\***

Read and initial the following and then sign below on the signature line.....

\_\_\_\_\_ I, we do hereby understand that my utility bill is due on the 20<sup>th</sup> of each month, and I also understand that I or we, should never tamper with any city metering equipment.

\_\_\_\_\_ I, we understand that a payment made by a check that is returned may result in a disconnection with a fee involved.

\_\_\_\_\_ I, we understand that the one-time deposit will be refunded only in the event that my account is closed, and it will be credited to the last bill.

\_\_\_\_\_, I, we understand that it is up to me or us to contact the Salem Water Department if we move or leave the premises. A late fee of \$5.00 will be added to my bill if it is paid after the 20<sup>th</sup> of the month. Further, the Salem Water Department is not responsible for the delivery of mail. The Salem Water Department offers an ACH draft to insure payments are made on time and are drafted around the 18<sup>th</sup> of every month. **\*\*If you are interested in bank draft, please complete and return bank draft form\*\***

I have read and understand my obligations as a customer of the Salem Water Department.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**I'd prefer to be emailed at:**

\_\_\_\_\_

\*\*\*\*If applicants do not own property, notarized easements must be obtained in the city's name prior to making payments for tap. All irrigation taps require a backflow device, which must be installed and tested annually by the owner.

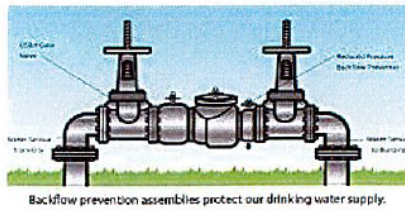
\_\_\_\_\_

(office use only)

Approved by: \_\_\_\_\_

Account Number: \_\_\_\_\_

Amount paid: \_\_\_\_\_



**\*\*\*\*Backflow device must be installed before meters can be dropped. Please call Don Costello at 864-608-1709\*\*\*\***

Under the Town of Salem Regulations, any of the following items that utilize Salem Water will require an approved Back-Flow Prevention Device: irrigation system, farmyard activities, or utilizing a private well that is tied to service lines that are also hooked up to Salem Water. If any of these exist or will be installed, please indicate on the survey below. If this water tap is for commercial use, the need for a backflow prevention device will be decided by the Salem Water Department Administrator.

Date: \_\_\_\_\_

Address to be serviced: \_\_\_\_\_

Customer/Owner: \_\_\_\_\_

Do you own or plan to have: \_\_\_\_\_ An Irrigation system

\_\_\_\_\_ Farm or barnyard activity

\_\_\_\_\_ Private Well connected to Salem Water

Does the address currently have a Back-Flow Preventor in place? \_\_\_\_\_

Description of planned water use at this address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*\*\*If Commercial, please give detailed description of water use\*\*\***

**\*\*\*If the questionnaire is intentionally answered to misinform the Salem Water Department of possible need for Back-flow preventor, you could be subject to loss of service\*\*\***

Signature: \_\_\_\_\_