

**TOWN OF ALPINE
WATER/ SEWER DEPARTMENT
TRANSFER ACCOUNT APPLICATION FORM**

I request to make a transfer of the following water/ sewer department account from the previous lot owner into my name. I agree to follow all rules and regulations of the municipality pertaining to the use of such water and, if applicable, sewer services.

*****PLEASE ATTACH COPY OF YOUR DEED TO THE PROPERTY*****

PREVIOUS OWNER: _____

NAME OF APPLICANT: _____

MAILING ADDRESS: _____

HOME TELEPHONE #: _____ WORK TELEPHONE #: _____

LOT #: _____ SUBDIVISION: _____

ACCOUNT NUMBER: _____

By signing below, I understand and agree to the following: BILLING PROCEDURES- Owners are responsible for water bill (sewer bill also if applicable) unless transfer to renter has been implemented through water department in the clerk's office. Bills will be computed and mailed to all customers no later than the fifth (5th) day of the following month. Payment will be due on the fifteenth(15th) day of the following month. Payments received after the twenty-fifth (25th) will be assessed a five dollar (\$5.00) late charge. **Note:** All billing is in arrears. For example, January's water/sewer usage is billed the beginning of February. Should payment become delinquent for a sixty (60) day period and clerk's office has had no response as to the reason, a **disconnect** order will be issued for the water service and the customer advised. This order will be executed within fifteen days of such notice. Please note a \$150.00 disconnect fee (shut-off fee) and \$150.00 reconnect fee will be assessed on past-due accounts that are shut-off .

SIGNATURE: _____

DATE: _____ TRANSFER FEE \$ 150.00 PAID BY CHECK # _____
CASH: _____

APPROVED BY:

TOWN ADMINISTRATIVE OFFICIAL: _____

REVISED 06/06/2005