

SERVICE APPLICATION

ICR WATER USERS ASSOCIATION

(Mail this completed form with your payment to the business office address below):

Mailing Address:
P.O. Box 2344
Prescott, AZ 86302

Office Address:
302 W. Willis St. Ste.#105
Prescott, AZ 86301

Office Phone (928) 445-6581
Fax: (928) 445-1830

The undersigned customer applies for water service from ICR Water Users Association at the indicated location. ICR Water Users Association, Inc., is subject to the rates, charges, rules and regulations established by the Arizona Corporate Commission. Billing rendered by ICR Water Users Association shall become delinquent on the 25th of the month following the month for which billing is rendered. ICR Water Users Association will make available, upon request within 60 days from the receipt of the request, a summary of ICR rate schedule or a copy of the Arizona Corporation Commission Rules and Regulation governing deposits, advances, service termination, billing and collection and compliant handling.

CUSTOMER INFORMATION:

NAME: _____ PHONE: _____

SERVICE ADDRESS: _____

SUBDIVISION: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Type of Service: Residential Commercial

IN CONSIDERATION for the provision of water service the customer agrees to pay the monthly service and usage charges as set forth in the Company's rates and tariffs filed with the Arizona Corporate Commission. The customer also agrees to pay the following charges:

<u>NEW METER INSTALLATION:</u>	<u>STANDARD</u>	<u>ONE-INCH</u>
Service Establishment Fee (non-refundable)	\$25.00	\$25.00
Refundable Deposit (refunded after 1 year, if no delinquency).\$50.00		\$50.00
Line & Installation Charge(refunded over a 10 year period to occupant).	\$520.00	\$690.00
Sales Tax.	\$ 1.84	\$ 1.84
TOTAL NEW METER INSTALLATION	\$596.84	\$766.84

TRANSFER:

Service Establishment Fee (non-refundable)	\$25.00
Refundable Deposit (refunded after 1 year, if no delinquency)	\$50.00
Sales Tax.	\$ 1.84
TOTAL TRANSFER	\$76.84

At such time as customer desires to terminate service with ICR Waters Users Association; not less than 3 days notice must be given. An accurate forwarding address must be given for the purpose of submitting a final bill and forwarding any remaining amount to the customer.

Date Service Requested: _____ Name of Property Owner: _____

Signature: _____ Date: _____

* A charge of \$15.00 will apply for returned checks.
*Note: If you have a fire sprinkler or private well please contact business office. A pressure regulator is recommended for all residences and is required in certain locations.