## City of Lincoln Application For Water Service Applicant Information Service Date: Name: Service Address: City: State: Zip: Mailing Address (if different): City: State: Zip: Home Telephone: Cell: Email: Date of Birth: Social Security Number: Drivers License Number: Employer Telephone: Employer: Employer Address: City: Zip: State: Co-Applicant Information Co-Applicant Name: Relationship to Applicant: Date of Birth: Social Security Number: Drivers License Number: Cell Phone: Email Address: Employer: Employer Telephone: Employer Address: City: State: Zip: Additional Information Please Circle One That Applies To Property: Own Owner Finance Rent Rent-To-Own Property Owner(if renting): Property Owner Telephone: Property Owner Address: State: Zip: Name of Nearest Relative Not Living With You: Address: City: State: Zip: Telephone: Relationship to Applicant: Applicant Previous Address: City: Zip: State:

Previous Water Service Provider:	
Number of Person(s) in Household:	
Additional Water Usage-Please Circle All that Apply:	
Sprinkler System	
• Business	
Swimming Pool	
Agricultural	
The undersigned applicant(s) hereby makes application to the City of Lincoln for water service as herein provided. The applicant(s) agrees that the following terms and conditions shall govern the relationship between the City of Lincoln and the applicant(s).	
The applicant(s) shall:	
<ul> <li>Agree to fully comply with and be bound by the Articles, Policies, Rules and Regulations of the City of Lincoln, now in force or as hereafter duly and legally supplemented, amended or changed and to promptly pay for the water at the applicable schedule of rates on the specified due dates.</li> <li>Agree to be fully and completely responsible for the water service yard line from the water meter to the residence.</li> </ul>	
<ul> <li>Agree to have one residence per meter service as required by Arkansas State Plumbing Code, Section 603.2.3.</li> </ul>	
<ul> <li>Agree and understand that City of Lincoln responsibility ends at the meter service and City of Lincoln will not be responsible for any leaks on the customer's plumbing system.</li> </ul>	
<ul> <li>Agree to fully comply with Arkansas State Plumbing Code and all City of Lincoln's Plumbing Inspection Policies.</li> </ul>	
<ul> <li>Agree to have the 911 address of the residence posted and fully visible from the road before any water service is connected.</li> </ul>	
<ul> <li>Agree to pay minimum water bill if water usage is 1000 gallons or less. Water rate schedule is available on our city website or by request at the Lincoln Municipal Building.</li> <li>APPLICANT AGREES TO TERMS &amp; CONDITIONS BELOW: ☐ Bills are due and payable in full on or before the 10th of each month or a 10% penalty will be added to the account. ☐ Water service will be disconnected if not paid in full by the 20TH of the month. ☐ A reconnect fee of \$75.00 during regular business hours (8-5 M-F) or \$150.00 after business hours will be assessed for accounts not paid in full by the 20th of the month.</li> </ul>	
Applicant Signature:	Date:
Co-Applicant Signature:	Date: