

City of Orchard P.O. Box 59 Orchard, TX 77464 Email: secretary@cityoforchardtx.gov

Ph: 979-478-6893

Application for Water / Sewer / Garbage Services

Applicant Signature	 Date	City Designee Signature	Date
city access at all times to	the water meter.		
property of the customer	at a point mutually agreeable by	both the city and the customer. The customer	will allow the
	•	rater meter and pipe necessary to connect the	
	•	authorization of the city and in compliance wit	•
•		mer shall not share, resell or sub-meter water	· ·
, -		d the customer agrees to purchase and receiv city as included in its approved tariff on file w	
The situagraps to call and		ement	o water from
Owner:	Tenant:		
Residential:	Commercial:		
Check applicable items fo	r the type of service:		
riedse list the names and	ages of all people living at the res	idence.	
Please list the names and	ages of all people living at the res	idence:	
Driver's License Number:			
Phone Number:			
Email Address:			
Mailing Address:			
Service Address:			
Co-Applicant:			
Name of Applicant:			