Service Address:

New Owner:

Mailing Address: **Your** Account number**: TBD**

City/State: Zip Code: Phone Number:

Email:  **(Required to set up auto-pay)**

All residents are required to read, understand and follow the district’s rules and regulations (R&R) of the district (pbhmd.org). The items listed below are further explained in the R&Rs but are commonly overlooked items.

* **I/We agree to notify PBHMD immediately of any contact information changes**
* A round metal object in the grass

  AI-generated content may be incorrect.I/We agree and understand that all leaks or issues after the Curb Stop valve (Pictured below) is my responsibility
  + When time permits, PBHMD will review meter codes for possible leaks or other concerns. We normally will contact you by phone, and if no response then Email
* I/We agree to pay PBHMD for all water usage, sanitary sewer service, storm water management, streetlight fees, late fees, and administrative fees.
  + Invoices are Generated on the 3rd of each month or the next business day
  + Payment is due on the 28th of the month when the invoice is generated
  + If payment has not been received by the 28th, Late fees will be assessed
    - $15.00 late fee when the next invoice is generated
    - $15.00 fee on the 18th of the following month, notice of pending shut off
    - On the 25th water will be shut off. With $50.00 shut off fee & $50.00 turn on fee
* I/We understand to not cover the Curb Stop, the Curb Stop must be accessible, if the District is required to relocate your Curb Stop it will be at the homeowner’s cost.
* I/We request that our invoice be sent via
  + Email \_\_\_\_ Paper \_\_\_\_ Both \_\_\_\_
  + Automatic payment is recommended, completing this via phone, in person or online.
* I/We have reviewed and understood the water conservation levels.
* **Prior to moving in a payment of $125.00 (refundable) deposit and a $125.00 Account Transfer Fee will be required (Normally collected at closing).**

If I choose to rent this property:

* A new Water Utility Agreement will be required between any New Tenant and PBHMD.
* **I/We understand that the property owner is ultimately responsible for all charges & fees.**
* I/We understand and agree it is my responsibility to immediately notify PBHMD of changes of tenants move in / out.
* I/We understand and agree pro-ration of bills between tenants(s) is my responsibility.
* I/We understand and agree that courtesy copies of monthly billing statements can be provided if requested.

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Signature (applicant) Date Signature (co-applicant) Date