



Boothbay Region Water District

PO Box 520, Boothbay, ME 04537

207-633-4723

Fax# 207-633-7921

Billing Agreement

Account No. _____ Effective

Date _____

Owner or Previous Owner of
Residence: _____

Applicant's Name: _____ Service

Location: _____

Phone or message number: _____

Mailing Address of
Applicant _____

Social Security No. _____ Driver's License

No. _____

Date of Birth _____ Place of employment or source of

income _____

Have you ever had service with this utility before? Yes [] No []

If so, last address or account
number _____

Previous
address _____

How long at previous address _____

Do you owe any outstanding bills for water? Yes [] No []

Do you owe outstanding utility bills of any kind of utility service? Yes [] No []

Have you filed for bankruptcy within the past 6 years? Yes [] No []

I hereby contract with the Boothbay Region Water District for water service and agree to pay for the same in accordance with the established rates of said Water District until written notice is given to discontinue said water service, and to conform to all Rules and Regulations of said Water District, now in force or which may hereafter be adopted, governing the use of water.

I further agree, that should my property ever be rented, I apply for said utility and will be responsible for payment in the event that the tenant fails to make full payment and agree to indemnify and hold harmless the Boothbay Region Water District from any and all debts and costs of collection in connection with said debt.

Signed _____ Owner

PLEASE CHECK ON

ANNUAL _____ **Year round water use at the same premises – Quarterly Billing**

SEASONAL _____ **Seasonal water use includes intermittent use, season after season, at the same premises. – Seasonal Billing**

