

WESTERN STATE WATER & SEWER

The undersign in consideration for connection of water supply and sewer service agrees to pay all charges made for utilities used and services rendered in or on said premises in accordance with the amounts shown by the water meter and for the time specified on the water bill.

The rate for water shall be determined by Western State Water & Sewer. Meters will be read at the end of each month, bills will be mailed to appropriate customer by the 5th of each month and payment is due no later than the 15th of each month. Late payments after the 15th will incur an \$8.00 late fee per month until paid in full. Bills that go beyond 45 days will receive a 10 day shut off notice.

All water & sewer accounts that are habitually 30 days late will be required to put a \$400.00 deposit on the account. This money will be returned after the account is closed minus any monies owed.

Sewer and Water Meter Fee \$54.00 per month

Minimum Water Fee	Zero water usage \$30.00
Water Usage	\$12.00 per 1000 gallons up to 25,000 gallons
Plus	\$15.00 per 1000 gallons from 26,000-100,000 gallons

Sewer

Plus Usage	\$6.00 per 1000 gallons up to 25,000 gallons
	\$7.50 per 1000 gallons from 26,000 to 100,000 gallons

Service Transfer Fee \$12.00

New Meter Replacement Fee \$400.00

APPLICATION FOR SERVICE FOR FENDEE ESTATES

SECTION A Please Fill Out

Street Address _____
Unit Number

BILLING ADDRESS:

NAME _____
HOME NUMBER

ADDRESS _____
MOBILE NUMBER

CITY ST ZIP _____
WORK NUMBER

EMAIL ADDRESS: _____ Check here if OK to Email bills

SOCIAL SECURITY NUMBER _____
DATE OF BIRTH

DRIVER LICENSE NUMBER _____
STATE ISSUED

EMERGENCY CONTACT NOT LIVING WITH YOU NAME ADDRESS & PHONE NUMBER

CHECK ONE: OWNER TENANT BUILDER

If tenant please provide owner information:

Name of Owner _____
Phone Number

Address, City, State, Zip Code

The undersigned further agrees that this agreement shall remain in effect and shall be binding until notice is given to Western State Water & Sewer of the termination of this agreement. It is also agreed that the undersigned must pay for all services used and rendered through the final reading of the water meter. This agreement is part of the Application for Services.

**APPLICANT SIGNATURE-TYPING YOUR NAME IN THIS BOX
WILL BE ACCEPTED AS DIGITAL SIGNATURE** _____
DATE

Return application to WSWWS PO Box 670 Williston, ND 58802 or email to:
Elaine@fendeegroup.com or Fax to: 701-847-7408 Questions call us at: 701-770-8317