

**FREEBURG WATER WORKS APPLICATION**

Customer Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (     ) \_\_\_\_\_ Date Moved In: \_\_\_\_\_

If Tenant, Landlord's Name: \_\_\_\_\_

Prior Occupant: \_\_\_\_\_

\_\_\_\_\_

Inside City Limits    Yes    No

Bill Water            Yes    No

Bill Sewer            Yes    No

Bill Trash            Yes    No

Residential    or    Business

\_\_\_\_\_

**Water Deposit Due Immediately: \$125.00**

Please return immediately to:    **Freeburg Water Works**  
   **PO Box 143**  
   **Freeburg, MO 65035**

Date Pd. \_\_\_\_\_  
Check # \_\_\_\_\_ Cash \_\_\_\_\_