



UTILITY BILLING DEPARTMENT

REMIT TO:
VILLAGE OF ANGEL FIRE
PO DRAWER 489
ANGEL FIRE, NM 87710
575-377-3232

WATER AND/OR SEWER SERVICE APPLICATION AND AGREEMENT
NEW BUYER APPLICATION

REQUESTED SERVICE DATE \_\_\_/\_\_\_/\_\_\_

\*SERVICE ADDRESS
SUBDIVISION BLOCK LOT# HOUSE # AND STREET NAME

[ ] WATER SERVICE

[ ] SEWER SERVICE

\*PURCHASED FROM (PLEASE INDICATE)

\*NAME LAST FIRST MI

\*BILLING ADDRESS STREET / PO BOX

CITY STATE ZIP CODE

\*PHONE: HOME ( ) WORK ( ) CELL ( )

EMAIL:

\*DRIVERS LICENSE # STATE

CARETAKER, PROPERTY MANAGER OR EMERGENCY CONTACT:

NAME

ADDRESS

PHONE ( )

OFFICE USE ONLY
PLEASE DO NOT WRITE IN THIS BOX
ACCOUNT #
ROUTE SEQ
METER #
REMOTE #
METER SIZE
DEPOSIT-W/S# \$ 50.00
DEPOSIT REFUSE \$
TOTAL \$
VILLAGE OF ANGEL FIRE
AUTHORIZED REPRESENTATIVE

Agrees to pay all applicable rates related to general metered service, disconnect and reconnect charges. It is the responsibility of the applicant to notify the Village of Angel Fire if service is to be terminated.

APPLICANT'S SIGNATURE DATE

\* MUST BE FILLED-IN COMPLETELY