OZ NESBITT, SR., CHAIRMAN Sherri L. Washington, Esq., Commissioner Post I Dr. Doreen Williams, Commissioner Post II ROCKDALE WATER RESOURCES

KIMBRY L. PEEK, SR., DIRECTOR TELEPHONE 770-278-7415 FACSIMILE: 770-278-8918



New Residential Meter Purchases (Engineering Department)

Purchasing Your Meter

- Please complete the "Application For New Monthly Services"
- > Please refer to the Residential Required Documents List
- > Submit the application and all required documents to the contact listed below:
- Contact: Tracey Miller 770-278-7432
 rwrmeterpurchases@rockdalecountyga.gov

Location: 1329 Portman Drive, Suite H Conyers, GA. 30094

- You will receive a quote within 1-2 Business Days Monday thru Friday
- Payment for meters can be made at the above location by 3:30 pm using a Check or Credit Card (MC/Visa)
- You may contact Tracey Miller with additional questions or instructions



APPLICATION FOR NEW MONTHLY SERVICE (Applications accepted Monday—Friday 8:00am—4:00pm)

| *Service Type: [] Residential | [] Business | | |
|---|-------------------------------------|-------------------------------|---|
| *Order Type: [] New Service | [] Transfer | [] Landlord | |
| *Own or Rent: [] Own | [] Rent | | *Required Fields |
| Documents Needed: (Please Note: Ac | lditional Documents May B | se Required) | |
| ☐ Signed Settlement Statemen | at/Tax Bill/Deed (Owner) or | Lease Agreement (Renter) | |
| ☐ Valid Government Issued p | oicture id for everyone on the | Settlement Statement/Lease ar | nd W9 (Business) |
| ☐ Management Agreement (if | you will have your property r | managed by a third party) | |
| *Date You Would Like to Start Servic | o: / / (If | Available Same Day Service | May Paguira Additional Faas) |
| | ` | • | May Require Additional Pees) |
| *Name of Applicant/Business: | | | |
| *SSN/Tax I.D.: | *DOB: | *License/ID#: | *License State: |
| *Tel/Cell: | * Employer: | *Employer Te | lephone: |
| Name of Co-Applicant: | | | |
| SSN/Tax I.D.: | DOB: | License/ID#: | License State: |
| Tel/Cell: | Employer: | Employer Tele | ephone: |
| *Service Address: | | *City: | *Zip Code: |
| Mailing Address (if different): | | City: | Zip Code: |
| *Have you ever had service with Rock | xdale Water Resource?□ Yes | or No? | |
| If Yes, please provide service address: | | City: | Zip Code: |
| Would you like to disconnect those se | | | |
| | , | | |
| *Reference Name: *Tel/Cell: If Renting: (If applicable, application will not be processed if landlord information is not listed) | | | |
| | - | • | |
| Name of Landlord/Property Owner:_ | | Telepho | one: |
| Address: | | | |
| Authorized Person Name (Other Than Of I hereby consent to receiving email to my email | | | |
| Account Management Companies and Indepen | dent Contractors, including Debt Co | ollection. | en agents, including, without initiation, |
| *Email Address | | *Email Consent: Yes | No (Initial Only)* |



Existing Development with Water/Sewer Already Established at Locations:

\$50.00 Administrative Fee Due at the time of Establishing New or Transferred Service (Non-Refundable)

New Development Location with No Existing Water Meter or Sewer at Location:

- \$200.00 Application Fee due at the time of purchasing a meter for a new development location (Non-Refundable)
- \$200.00 Application Fee due at the time of purchasing new sewer service for new development (Non-Refundable)

<u>Deposits:</u> A Deposit Payment maybe required at the time that new service is established. The deposit amount may vary based on the type of service and results from a soft credit check.

To aid Rockdale Water Resources in the review and acceptance of this application, Applicant and Co-Applicant unconditionally agree to comply with all applicable Ordinances, rules and regulations of same (as currently in force and as may be lateramended), and to promptly pay for all water provided and wastewater treatment used. This includes all service billings, and if applicable, late fees, and other fees and charges as they may apply. If bills and charges are not paid when due, Applicant and Co-Applicant also agree to be subject to reasonable attorneys' fees, costs of collection and filing fees, and Applicant and Co-Applicant hereby consent to venue in Rockdale County, Georgia should Rockdale Water Resources be required to bring such an action.

By providing Rockdale Water Resources with Applicants' or Co-Applicants' cellular phone numbers, each hereby consents to receiving personal, autodialed and/or pre-recorded message calls to their cell phones(s), and to any other phone number(s) provided to Rockdale Water Resources, its agents and affiliates, including, without limitation, any account management companies and independent contractors, including debt collectors.

Applicant and Co-Applicant hereby grant Rockdale Water Resources permission to apply for their credit scores and each understands that the amount of security deposit may be determined by said credit score(s). The Applicant and Co-Applicant further acknowledge (jointly and severally) their responsibility for any accrued cost by Rockdale Water Resources to cause replacement or repair to Applicant's and Co-Applicant's service(s) due to damage and/or tampering.

As a result of starting or restoring water service at the above address, Applicant agrees to turn off all water facilities (irrigation, sinks, tubs, faucets/inside and outside, private cut off valve, etc.) before services are established/restored to mitigate any damage to this property or its contents. Applicant understands Rockdale Water Resources is not responsible for water damage to this property or its contents, as a result of any negligence on the Applicant's part.

| *Applicant Signature: | Date: |
|---|---|
| Co-Applicant Signature: | Date: |
| Please submit your comple | ted application and required documents to: |
| • Email: newwaterservice@rockdalecountyga.gov | |
| • In Person: 940 South Main St, Convers, GA, 30012 | |
| Mail: Rockdale Water Resources, P.O. Box 1378, Convers, | , GA, 30012. |
| • Fax: (770) 918-6514 (IDs will need to be emailed or brough | nt into the office) |
| | e at (770) 278-7400 or a Customer Service Representative will contact you to ments and payments are required to be in by 4pm in order to receive service the |

| RWR OFFICE USE ONLY | | | | | |
|---------------------|---------------|--------------|-----------|--|--|
| WATER | WATER & SEWER | IRRIGATION | FIRE LINE | | |
| SIZE | SIZE | SIZE | SIZE | | |
| | AP LOCATION # | - CUSTOMER # | <u></u> | | |
| | COLOCATION# | - CUSTOMER# | <u> </u> | | |

"Rockdale Water Resources is perfectly positioned to provide the ultimate resource – WATER" 940 SOUTH MAIN ST · CONVERS, GEORGIA 30012

www.rockdalecountyga.gov

BOARD OF COMMISSIONERS

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Required Documents for Residential Water Connection

- 1. Fill out and sign an Application for New Monthly Service in the owner's name
- 2. Provide proof of ownership. Choose one of the following:
- 3. Warranty Deed with the Rockdale County seal/stamp and owner's signature(s)
- 4. the 3–5-page part of the Settlement Statement from closing that has the property details and owner's signature(s)
- 5. the Property Tax Bill
- 6. Provide a color copy of the Photo ID for the owner(s)
- 7. Provide the Tax ID document showing the EIN if the owner(s) is listed as a business. If you do not have your tax document showing your tax id number, you can submit a W-9
- 8. If you are using a 3rd party to process your water service paperwork (someone other than the owner or employee), please proved a signed letter authorizing that person/business to do this on your behalf. This includes Power of Attorney so submit document showing proof in the form of a legal documents.