

**TOWN OF CENTRAL WATER**

(864) 639-6381

www.cityofcentral.org

- YOU SHOULD RECEIVE WATER BILL BY 4<sup>TH</sup> OF EVERY MONTH
- IF YOU DON'T RECEIVE WATER BILL BY THIS TIME, PLEASE CALL OR COME IN...THE TOWN IS NOT RESPONSIBLE FOR MISDIRECTED MAIL.
- **WATER BILLS ARE DUE BY THE 15<sup>TH</sup> OF THE MONTH. IF NOT PAID, A 20% PENALTY WILL BE ADDED THE NEXT BUSINESS DAY.**
- IF PAYMENT IS NOT RECEIVED BY THE 25<sup>TH</sup>, WE **DISCONNECT** WATER SERVICE ON THE NEXT BUSINESS DAY. RECONNECTION FEES ARE \$40.00
- WE DO NOT ACCEPT PARTIAL PAYMENTS & WATER BILLS CAN NOT BE HELD PAST DUE DATE
- WE ACCEPT CASH, CHECK, VISA, MASTERCARD, OR DISCOVER. BANKDRAFT IS ALSO AVAILABLE.
- PLEASE CALL OUR WATER DEPARTMENT TO DISCONNECT YOUR WATER SERVICE BEFORE YOU MOVE AND REMEMBER TO GIVE US YOUR FORWARDING ADDRESS.

**PLEASE DO NOT CUT YOUR WATER ON/OFF AT METER. ONLY TOWN EMPLOYEES ARE AUTHORIZED TO DO SO. THIS CARRIES AT \$1092.50 FINE!**

**TOWN OF CENTRAL  
UTILITY SERVICE AGREEMENT**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

SERVICE FEE \_\_\_\_\_

TOWN REPRESENTATIVE \_\_\_\_\_

DATE \_\_\_\_\_

BALANCE OF SERVICE FEE WILL BE APPLIED TO FINAL BILL(S). SERVICE WILL BE DISCONNECTED AFTER THE 25<sup>TH</sup> OF THE MONTH FOR NON-PAYMENT WITHOUT A SECOND NOTICE. TOWN OF CENTRAL NOT RESPONSIBLE FOR MISDIRECTED MAIL.

**TOWN OF CENTRAL  
1067 W. MAIN STREET  
P. O. BOX 549  
CENTRAL, SC 29630  
864-639-6381**

LAST NAME \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DRIVERS LICENSE \_\_\_\_\_ STATE \_\_\_\_\_ DOB \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_ WORK/CELL \_\_\_\_\_

OWNER \_\_\_\_\_ TENANT \_\_\_\_\_ BUILDER \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

STUDENT'S PERMANENT ADDRESS \_\_\_\_\_

PROPERTY OWNER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

HAVE YOU HAD SERVICE WITH THE TOWN OF CENTRAL BEFORE ?  YES  NO \_\_\_\_\_

REFUNDABLE FEE \_\_\_\_\_ NON-REFUNDABLE FEE \_\_\_\_\_ TOTAL FEE \_\_\_\_\_

This is a contractual agreement. The consumer hereby acknowledges and agrees to the conditions of service as follows: I WARRANT THAT THE INFORMATION FURNISHED FOR THE PURPOSE OF OBTAINING WATER SERVICE IS TRUE AND COMPLETE. I ALSO AGREE TO RECEIVE & PAY FOR SAID SERVICE IN ACCORDANCE WITH THE APPLICABLE RATE SCHEDULES & SERVICE REGULATIONS OF THE TOWN. IT IS AGREED THAT THE TOWN RESERVES THE RIGHT TO DISCONTINUE SERVICE IN CASE OF VIOLATION OF ANY TERMS. SERVICE WILL BE DISCONTINUED AFTER THE 25<sup>TH</sup> OF THE MONTH FOR NON PAYMENT WITHOUT 2<sup>ND</sup> NOTICE. THE TOWN IS NOT RESPONSIBLE FOR WATER BREAKS. BALANCE OF SERVICE FEE WILL BE APPLIED TO FINAL BILL(S).

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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WORK ORDER # (Pick Up) \_\_\_\_\_ WORK ORDER#(Finalize) \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ ROUTE # \_\_\_\_\_ METER# \_\_\_\_\_

CASH \_\_\_\_\_ CHECK # \_\_\_\_\_ TURN ON DATE \_\_\_\_\_ INITIALS \_\_\_\_\_

VISA  MC  DISC \_\_\_\_\_