

**Lowndes County Water Authority**

641 State Hwy 21 South  
P.O. Box 736  
Hayneville, Alabama 36040-0736  
PHONE (334) 548-6235

**APPLICATION FOR WATER SERVICE**

Name/Company on Account: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Service Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Social Security # \_\_\_\_\_, Drivers License # \_\_\_\_\_ State: \_\_\_\_\_

Emergency Telephone # \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

**Employer Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**Renter Information:**

Property Owner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

UTILITY EMPLOYEE SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_