**COWAN BOARD OF PUBLIC UTILITIES**

**APPLICATION FOR WATER SERVICE**

**For office use only**

**Account Number \_\_\_\_\_\_\_\_\_\_\_ Meter # \_\_\_\_\_\_\_\_\_\_\_\_\_ Reading \_\_\_\_\_\_\_\_\_­­­­**

**Applicants Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driver’s License # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driver’s License # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you or your spouse had water service in Cowan before? \_\_\_\_\_\_\_\_\_\_\_\_**

**If so, what name was the service in? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address for new service \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing address (if different) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Previous address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Spouse’s Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of time \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Residential Service Commercial Service**

**Do you *Own* or *Rent* at the address for new service?**

**Landlord Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact not residing at location who may be contacted in an emergency.**

**Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date you would like water service connected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **The undersigned hereby has applied for the water service at the**

**address shown above and agrees to pay for said services measured.**

**by the City of Cowan’s Board of Public Utilities Meters and according**

**to rates applicable.**

1. **The applicant agrees to permit employees of the Cowan Board of**

**Public Utilities free access to the premises of the consumer for the**

**purpose of inspecting, reading, repairing, or removing property of**

**the Cowan Water Department.**

1. **The applicant understands the billing procedure as set forth in his/her.**

**Copy of “Facts for Water Customers” and has received a copy.**

1. **The applicant understands that it is his/her responsibility to pay all.**

**City costs, all collection fees, and/or attorney fees if his/her account is.**

**turned over for collection.**

**Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_**

**Approved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_**

**FACTS FOR CBPU WATER CUSTOMERS**

COWAN BOARD OF PUBLIC UTILITIES

301 CUMBERLAND ST E

P.O. BOX 338

COWAN, TN 37318

(931) 967-7318

Office hours are 7:30 a.m. to 4:00 p.m. Monday through Friday.

The office is closed for lunch each day from 12:00 p.m. to 12:30 p.m.

**Homeowner**

Property owners pay a $50 non-refundable cut on fee.

**Renter**

Renters pay a $50 non-refundable cut on fee and a $150 deposit. The balance of the deposit is refundable once applied to the final bill.

* Bills are due in the office on or before the 15th of every month and may be paid at the office during regular business hours or put in the night deposit located to the right of the front door of City Hall. Payments may also be mailed to the address above, paid online at <https://cowan.qpaybill.com/Start.aspx>, or by calling 1-844-281-5968. Failure to receive a bill by mail does not release you from liability to pay the amount due.
* A 10% late charge penalty is posted to all unpaid bills on the 16th of every month. (Unless the 15th falls on a Saturday or Sunday)
* If bills are unpaid by 7:30 a.m. on the morning of the 26th, a $50 non-payment fee will be added to all unpaid accounts. Services will be discontinued without notice. (If the 26th falls on a Saturday or Sunday, services will be discontinued on the next business day.)
* The balance of the water bill in addition to the $50 non-payment fee must be paid in full for serviced to be reconnected. Services will be reconnected by the end of the business day. Checks will not be acceptable payment for reconnection. Payment must be received in full ***whether or not*** the water service has already been disconnected.
* Payments made on accounts with checks or drafts that are returned for insufficient funds will be charged a $35 fee and services will be discontinued without notice.
* A $12 charge for garbage pickup is added to your water bill each month. Garbage is picked up each Monday on the West side and Tuesday on the East side of town. The city requires you to place your garbage in a sturdy can with handles and a lid. All garbage must be bagged. Garbage cans may be no larger than 32 gallons in size.
* Customers have the responsibility to keep their water meter accessible to meter readers. No cars are to be parked over meters and dogs should be chained away from meters.
* It is the responsibility of the customer to inform the Water Clerk at City Hall when you move and no longer need water service. Failure to do so will result in the continuation of bills being generated each month which you will be responsible for.

**I have read and understand the facts for CBPU water customers.**

Applicant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COWAN BOARD OF PUBLIC UTILITIES

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P.O. BOX 338

COWAN, TN 37318

RESIDENTIAL CROSS-CONNECTION QUESTIONNAIRE SURVEY

OCCUPANT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OCCUPANT ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Occupancy: Own Rent
2. Meter serves:

How many homes?\_\_\_\_\_ How many buildings?\_\_\_\_\_

1. Do you have any of the following? Please check all that apply.

Hot tub\_\_\_ Green House\_\_\_

Swimming Pool\_\_\_ Underground sprinkler system\_\_\_

Jacuzzi\_\_\_ Darkroom Equipment\_\_\_

Waterbed\_\_\_ Drip/Soaker Irrigation System\_\_\_

Solar System\_\_\_ Portable Dialysis Machine\_\_\_

Wood burning hot water heater\_\_\_

Utility Sink w/ Threaded Faucet\_\_\_

Insecticide Sprayer (that attaches to garden hose)\_\_\_

Ghost Pipes (unidentified)\_\_\_

1. Do you have a bathtub that fills from the bottom?\_\_\_\_
2. Do you have a water softener or any extra water treatment system?\_\_\_\_
3. Do you have auxiliary water supply on your premises?\_\_\_
4. Do you have livestock?\_\_\_

If so, do you use a water trough or water system connected by Cowan Utilities?\_\_\_\_

1. Is your home or building elevated above your water meter?\_\_\_
2. Does a creek, river, or spring water run near or on your property?\_\_\_
3. Do you have a booster pump, well pump, or any other type of water pump?\_\_\_\_
4. Do you receive irrigation water from a different source?\_\_\_\_
5. Do you have a backflow protection device on your property now?\_\_\_\_
6. Do you have any situation that you are aware of that could create a cross connection?\_\_\_\_
7. Do you have any other water-using equipment on your property not mentioned above?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Occupant’s Signature Date