



TOWN OF YADKINVILLE  
"A TOWN IN PROGRESS"

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Request for Water and/or Sewer Service

Date for Cut On/Off: \_\_\_\_\_ Tenant/Owner Deposit: \$ \_\_\_\_\_

Name To Bill: \_\_\_\_\_

Drivers Lic. No.: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_

Account#: \_\_\_\_\_

This is a request for the above named services provided by the Town of Yadkinville. I understand and agree to abide by the regulations and policies set forth by the Town and will pay all fees for the use of these services.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_