

Benton County Water Authority #4
User Agreement
P.O. Box 861
Lowell, AR 72745-0861

Date: _____

I, _____, hereby make application to the Benton County Water Authority #4 (hereinafter called BCWA-4) for membership in the BCWA-4 and for water service at the following location: (must have a 911 address)

Service Street Address: _____

City, State, Zipcode: _____

This agreement is for members who are requesting service be transferred to their name or to connect to a previously installed water connection. In consideration of, and as a condition for receiving services from BCWA-4, I understand and agree as follows:

- 1) To pay to BCWA-4 all applicable service charges and fees, rates, meter connection charges, sales taxes, fees for Federal Safe Drinking Water Act compliance, and any other applicable charges and fees in accordance with all applicable Ordinances of BCWA-4, the rules, regulations, procedures, and specifications of BCWA-4, and any other applicable law, as they now exist or as they may be hereafter amended, said ordinances, rules, regulations, procedures, specifications, and applicable laws, being incorporated herein and made part of this Agreement.
- 2) Understand there is an existing 15-foot permanent easement for the water lines, over, under or across any real property bounding the existing water lines of the BCWA-4 and will maintain and keep clear of debris the area immediately surrounding the water meter box as not to obstruct or prevent access to BCWA-4 or their contractors for repair or maintenance of installed water meter.
- 3) I understand that I will be billed the minimum monthly amount, as shown on our website under Rates & Fees, even if no water is used. The minimum monthly bill includes up to 1,500 gallons of water used. Any water used above 1,500 will be charged in addition to the minimum monthly bill as shown in our schedule of fees.
- 4) I understand that if my bill is not paid by the due date, a ten percent (10%) late fee for the amounts due for water services will be charged. I understand if my bill remains unpaid after the billing date, my water will be subject to disconnection. If my services are disconnected, applicable service fees must be paid before service is restored.
- 5) Any fees paid in regard to this service connection is non-transferable to another location.
- 6) Unless I have provided instructions to the contrary, by providing my wireless telephone number and/or email to BCWA-4, I consent to receive from BCWA-4 messages that are closely related to utility services, including, without limitation, calls and emails that (a) warn about boil orders, conservation measures, planned or unplanned service outages, and the like; (b) provide updates about outages or restoration, ask for confirmation of service restoration or information about lack of service, and provide notification of meter work, line maintenance, or other work that directly affects the customer's utility service, and (c) calls or emails that warn about the likelihood that failure to make payment will result in service disruption (disconnection notices).

Applicant Name (Please Print): _____ Owner [] Renter []

Driver's License Number: _____ or SSN: _____

Date of Birth: _____

Employer: _____

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Employer Phone Number: _____

Applicant's Billing Address: _____

Primary Phone Number: _____ Cell [] Home [] Work []

Secondary Phone Number: _____ Cell [] Home [] Work []

E-Mail Address: _____

**** Required Only if Renting**

Landlord's Name: _____

Landlord's Phone Number: _____

Lease Start Date: _____

Lease End Date: _____

Requested Service Start Date: _____

I agree that the information I provided above is accurate and true:

Signature: _____

**** Please check here if you wish to pay by credit card and someone from the office will contact you with information on how to pay by credit card. Please note that transaction fees will apply.**

[] I wish to pay by credit card

To be completed by BCWA-4 Office Personnel

Connection Fee Received: \$ _____ Payment Received: _____

Payment by: Personal Check: _____ Cashier's Check: _____ Money Order: _____ Credit Card _____

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