## **Application and Agreement for Secondary Water Magna Water Company, an Improvement District**

Owner's Name			Spouse's Name			
Corporation Name (if appli	cable)	1417-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Name of Registered Agent			
Address of Property to be S	Serviced					
Parcel Number			Proof of Ownership Provided  (Please check one below)  Principle Residence Rental Property			
Date Purchased	Home Telephone	No.	· · · · · · · · · · · · · · · · · · ·		No. Of Units	
Address to where the month	nly bill shall be mai	led if different than the p	property to be serviced			
Social Security Number	Date of Birth	Driver's License Num	sber Spouse's SSN	Spouse's DOB	Spouses's DL No.	
Previous Address		E	mployer Name			
		E	Employer's Address		Work No.	
Name/Address/Phone No./I	Relationship	hone No./Relationship				
Other Utility References:	Name/Address/P	hone No.				
Name/Address/Phone No.			444			
Name/Address/Phone No.		1-7/14/4/1/4-1/4/1/4/1/4/1/4/1/4/1/4/1/4/1/				
In order to obtain service, e access to all meters, lines at		agree to be governed by	the District's Rules and F	Regulations. Property owners n	nust allow District	
Magna Water Company reso Agreement. Accounts will be	erves the right to ter be considered deline	rminate secondary water quent 30 days after billin	services provided to any g date. The owner agrees	ting the bills for any and all re or all units covered by this Ap to pay interest on all past due tion including reasonable attor	plication and amounts at the rate	
	onsible for proper			ustomer side of the meter box vner's property to the point wh		
Date	Owner	's Signature		Please Print Signature		