



**Springdale Water Utilities**



526 Oak Avenue P.O. Box 769 Springdale, Arkansas 72765-0769 (479) 751-5751

## Residential Customer Information Form

Rent: \_\_\_\_\_ Own: \_\_\_\_\_

Requested Start Date (\$50 fee for same day service): \_\_\_\_\_

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

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Driver's License#: \_\_\_\_\_ State: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Additional Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Spouse Name/ Roommate Name: \_\_\_\_\_

Spouse/Roommate Driver's License#: \_\_\_\_\_ State: \_\_\_\_\_

Landlord Name & Phone #: \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_