



Hawaii Water Service Kaanapali



NEW INSTALLATION
RECONNECTION

OWNER
TENANT

PARCEL # _____ ACCOUNT # _____

STREET ADDRESS _____

DATE OF APPLICATION _____ DATE OF SERVICE _____

SERVICE FEE _____ CURRENT RATE _____ DEPOSIT _____ CLASS _____ PURPOSE _____

OWNER (1) _____

OWNER (2) / AGENT _____

Billing Information

APPLICANT'S NAME _____

ADDRESS _____

CITY / STATE _____ ZIP _____

LAST 4 DIGITS OF SOCIAL SECURITY NUMBER _____

HOME / PRIMARY PHONE _____ CELL / ALTERNATE PHONE _____

EMAIL _____ DATE OF BIRTH _____

Authorization

THE UNDERSIGNED HEREBY APPLIED TO HAWAII WATER SERVICE FOR WATER SERVICE AT THE ABOVE LOCATION AND IN CONSIDERATION OF THE INSTALLATION OF SUCH SERVICE AND METER, AGREES TO PAY ALL CHARGES INCURRED UPON SUCH LOCATION FOR SUCH WATER SERVICE. THE UNDERSIGNED UNCONDITIONALLY GUARANTEES PAYMENT OF ALL CHARGES FOR WATER SERVICE DURING HIS/HER TENURE AS OWNER OF THE LOCATION DESCRIBED HEREIN, INCLUDING BUT NOT LIMITED TO, CHARGES INCURRED BY PRESENT AND FUTURE TENANTS OF THE OWNER OR OTHER PARTIES HAVING ACCESS TO SAID LOCATION.

BY SIGNING BELOW YOU ACKNOWLEDGE YOU HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE TERMS.

SIGN AND DATE — TENANT _____ SIGN AND DATE — OWNER (1) _____

SIGN AND DATE — ACTING AGENT _____ SIGN AND DATE — OWNER (2) _____

RECEIVING CLERK _____ APPROVING CLERK _____