



**BRUNSWICK-GLYNN COUNTY  
JOINT WATER & SEWER COMMISSION**

700 Gloucester St.  
Brunswick, GA 31520  
Customer Service: (912)261-7100  
FAX: (912)261-7179

**Checklist for Residential Application (new service)**

\*Send all completed documents along with copies of ID and occupancy verification to:

Fax: (912)261-7179

or

Mail: **Brunswick-Glynn County Joint Water & Sewer Commission**  
**700 Gloucester St. Suite 300**  
**Brunswick, GA 31520**

- Completed application.
- A copy of acceptable identification in the form of a picture ID  
-Drivers License, Passport, etc.
- Verification of your Social Security Number  
-Including your SSN on this application is not required if applying for service in person at our office , but the JWSC must obtain your SSN in order to verify your identity, pursuant to FTC regulations, in order to establish a covered account. This can be provided by other means before opening your account.
- Billing- All new accounts will be billed for all water and sewer from the last account of record unless the customer can prove otherwise.
- Deposit – City & County district customers: \$100.00
- Connection Fee – City & County district customers: \$15.00

Your deposit and connection fee *must* accompany the application when you either mail or fax it in. Payments can be made by check or credit card. Make checks payable to Brunswick-Glynn Co. JWSC (mail only when paying by check).

If you wish to pay by credit card, please fill out the following and sign which authorizes a charge of the above corresponding amount for a deposit. Otherwise, payments must be made in person at customer service (you must present credit card when paying in person). Please note: This transaction is for a onetime charge to cover the amount of deposit and connection fee and does not constitute an agreement for recurring payments from given card information.

Card Type:  Visa     MasterCard

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp Date: \_\_\_\_ / \_\_\_\_

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

\*By signing the above you agree to a onetime charge of the deposit amount and connection fee for service.

<i>JWSC Use Only</i>
<b>Entered By:</b>
Initial: _____

- New Customer
- Transfer
- Disconnect Service



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**APPLICATION FOR SERVICE (RESIDENTIAL)**

Have you ever had water/sewer service within Brunswick-Glynn County Service Area?  Yes  No

If yes, last address: \_\_\_\_\_

<b>TURN ON WATER:</b>	Account No. _____	<b>TURN OFF WATER:</b>	Account No. _____
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Service Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Effective Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Applicant Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle or Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_ State: \_\_\_\_\_ DL#: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Work or Cell: \_\_\_\_\_

Billing or Forwarding Address (If different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP or Postal Code: \_\_\_\_\_

Do You:  Own  Rent Email Address: \_\_\_\_\_

**Co-applicant Information (Signature required) \*Responsible for account**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle or Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_ State: \_\_\_\_\_ DL#: \_\_\_\_\_

Additional Person Authorized on Account (no signature required) :

**Landlord Contact**

Landlord's Name: \_\_\_\_\_ Landlord's Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_ Phone: \_\_\_\_\_

The undersigned hereby requests provision of water and sewer service by Brunswick-Glynn County Joint Water and Sewer Commission, for the premises described hereon, for which I agree to pay monthly at the scheduled rate then in effect when due. I will give written notice to the JWSC of my vacating or selling of said premises. I will comply with the rules and regulations of the JWSC making them a part of this agreement. In the event of default of payment, the ordinances of the JWSC will apply and any fees assessed for such default will be my responsibility. I agree to claim no damage on account of the stoppage of the flow of water or sewer resulting from accident or the making of alterations, repairs or improvement by the JWSC. I agree to keep all plumbing on the premises in repair and promptly stop all leaks. If I fail to comply with this agreement, or any part thereof, the JWSC may turn off the water and/or discontinue sewer services to the premises without notice to me. The JWSC reserves the right to contact the applicant hereon at any of the locations described herein. I acknowledge receipt of the Customer Information Brochure.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Co-applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Documents Received: <input type="checkbox"/> Lease <input type="checkbox"/> Closing Statement <input type="checkbox"/> Driver's License <input type="checkbox"/> Approved Picture Identification	Checked By:(Initial) <span style="border: 1px solid orange; display: inline-block; width: 40px; height: 20px;"></span> Date: _____	Entered By:(Initial) <span style="border: 1px solid orange; display: inline-block; width: 40px; height: 20px;"></span> Date: _____
Deposit Received: \$ _____ <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash Deposit Transferred: <input type="checkbox"/>		