

- New Customer
- Transfer
- Disconnect Service



**Brunswick-Glynn County
Joint Water & Sewer Commission**

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

APPLICATION FOR SERVICE (RESIDENTIAL)

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

If yes, last address: _____

TURN ON WATER:	Account No. _____	TURN OFF WATER:	Account No. _____
Service Address: _____		Service Address: _____	
City: _____ Zip Code: _____		City: _____ Zip Code: _____	
Effective Date: _____/_____/_____		Effective Date: _____/_____/_____	

Applicant Information

Last Name: _____	First Name: _____	Middle or Maiden: _____
Date of Birth: _____/_____/_____	SSN: (Optional) _____	State: _____ DL#: _____
Primary Phone: _____		Work or Cell: _____

Billing or Forwarding Address (If different):

City: _____ State: _____ ZIP or Postal Code: _____		
Do You: <input type="checkbox"/> Own <input type="checkbox"/> Rent	Email Address: _____	

Co-applicant Information (Signature required) *R es p o n s i b l e f o r a c c o u n t

Last Name: _____	First Name: _____	Middle or Maiden: _____
Date of Birth: _____/_____/_____	SSN: (Optional) _____	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) 	Entered By:(Initial) 	Date: _____/_____/_____
Deposit Received: \$ _____ <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash Deposit Transferred: <input type="checkbox"/>			