

# SCATCHET HEAD WATER DISTRICT

## APPLICATION AND AGREEMENT FOR SINGLE WATER SERVICE

NAME OF PROPERTY

OWNER: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

ASSESSOR'S TAX PARCEL NO.: \_\_\_\_\_

\_\_\_\_\_

DATE \_\_\_\_\_ OWNERS SIGNATURE \_\_\_\_\_

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### OFFICE USE ONLY

SERVICE HOOK-UP FEE: \$10,000.00 \_\_\_\_\_

SERVICE INSTALLATION FEE: \$ \_\_\_\_\_

OTHER: \$ \_\_\_\_\_

**TOTAL DUE NOW: \$10,000.00 \_\_\_\_\_**

*Service installation fee will be invoiced to property owner when work has been completed.*

**MAIL TO:**  
SCATCHET HEAD WATER DISTRICT  
PO BOX 263  
COUPEVILLE, WA 98239

**DELIVER TO:**  
BRANCH BUSINESS SERVICES  
404 S MAIN STREET  
COUPEVILLE, WA 98239