

PORT O'CONNOR IMPROVEMENT DISTRICT APPLICATION FOR WATER & SEWER SERVICE

39 DENMAN DRIVE • P.O. BOX 375 • PORT O'CONNOR, TEXAS • 77982

(PH) 361-983-2652 • (FAX) 361-983-2235 • (TDD) (711) 1-800-735-2988 • (TTY) 1-800-735-2989

UPDATE

Please Check: MALE FEMALE HISPANIC NON-HISPANIC
 WHITE BLACK ASIAN NATIVE INDIAN PACIFIC ISLANDER OTHER
REQUIRED BY THE FEDERAL GOVERNMENT FOR DEMOGRAPHIC PURPOSES

Applicant's Name:	Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Other
Street Address for POC:	Property Owner's Name:
Lot and Block Legal Description in POC:	Property Owner's Address:
Billing Address:	Applicant's Phone No.:
Billing Address City, State & Zip:	Applicant's Cell No:
Applicant's Driver's License #:	Work Phone:
Spouse's Name:	Other Contact Name & Relation:
Spouse's Phone No:	Other Contact's Phone No:
Email:	Do you have or are you going to install: <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Water Well <input type="checkbox"/> Pool <input type="checkbox"/> Outdoor Shower

Customer Signature

Date

District Representative

Date