

NEW CUSTOMER SETUP FORM

	Customer Name:
Business Name if DBA: Mailing Address:	Customer Name:
	Is this your Primary Residence <u>Yes/No</u> (Circle)
responsible for all charges Information. Please fill ou	_
Service Requested By:	Date:
	OFFICE USE ONLY
Date of Actual Close:	Date Setup in PC:
	t of each month regardless of date of sale
	[Attach Owner/Sale Docs or Receipts]
	FÖRGET!
Dese	cription of Service: Connected/Disconnected

McGill Ruth Sewer & Water GID is an Equal Opportunity Provider and Employer

<i>Turn off in PC if service will not immediately be connected</i> <u>Applicant</u> :	
I do not wish to furnish this information	PLEASE READ
Ethnicity: Hispanic or Latino Not Hispanic or Latino	
Race: American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Sex: Male / Female (Circle One)	This information is requested by the Federal Government in order to monitor compliance with Federal Laws
<u>Co-Applicant</u> :	prohibiting discrimination against
I do not wish to furnish this information	applicants seeking to
Ethnicity: Hispanic or Latino Not Hispanic or Latino	participate in this
Race: American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White	program. You are not required to furnish this information, but are encouraged to do so. This information will
Sex: Male / Female (Circle One)	not be used in
Applicant chose not to furnish this information, identification was made by: Visual Observation: Surname:	evaluating your application or to discriminate against you in any way.
Application taken by:	However, if you
Date:	choose not to furnish
Employee taking application	it, we are required to note the race/national origin of individual applicants on the basis
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