



**NEW CUSTOMER ACCOUNT SETUP**

New Customer (*Customer fill out and return for new service accounts*)

Name: \_\_\_\_\_ Service Address: \_\_\_\_\_

Business Name if DBA: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Is this your Primary Residence Yes/No (Circle)

E-mail \_\_\_\_\_

**Y / N Sign me up for important text alerts at the above phone and/or email address**

***All new accounts will be charged a \$50 new account fee. Account owner/customer must be the legal owner listed on the deed and White Pine County Records. No renters or tenants may be placed on the account. Please see back of form for Federal Government Information***

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*



**OFFICE USE ONLY**

*All customer information to be verified with White Pine County or Deed of Sale before creation of account*

New Customer Acct. Number: \_\_\_\_\_

Date of Actual Close: \_\_\_\_\_ Date Setup in PC: \_\_\_\_\_

*\*All accounts set up the first of each month regardless of date of sale*

**Final Billed Customer Information**

Acct. No. \_\_\_\_\_ Customer Name: \_\_\_\_\_

**Description of Service:** Connected/Disconnected

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

Applicant:

\_\_\_\_\_ I do not wish to furnish this information

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)

Co-Applicant:

\_\_\_\_\_ I do not wish to furnish this information

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)

***Applicant chose not to furnish this information; identification was made by:***

Visual Observation: \_\_\_\_\_

Surname: \_\_\_\_\_

Application taken by:

\_\_\_\_\_ Date: \_\_\_\_\_

Employee taking application

**PLEASE READ**

This information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis