

# WATER SERVICE CONNECTION FORM



## HAYS TRINITY GROUNDWATER CONSERVATION DISTRICT

It is the responsibility of the water service supplier to submit the completed "Water Service Connection" form and \*\*\$800 connection fee\*\* to the District. Upon receiving the completed form and \$800 per connection fee, the District will process and send a "Certificate of Connection" to both the water service customer and the water service supplier. The "Certificate of Confirmation" must be received prior to activating the new service.

### Section A :

#### Owner Information:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

State: \_\_\_\_\_

Best Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

\*Best E-Mail: \_\_\_\_\_

### Section B :

#### New Connection Information:

911 Street Address: \_\_\_\_\_  
\_\_\_\_\_

911 City: \_\_\_\_\_

Water Service \_\_\_\_\_  
Supplied By: \_\_\_\_\_

I understand and agree that my typed in name will be considered my official signature

Signed: \_\_\_\_\_

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

\* For fastest turn around

\*\* It is the responsibility of the owner/applicant to pay any and all Bank fees for Notice of Insufficient Funds on a returned check

### FOR DISTRICT USE ONLY

Connection ID #: \_\_\_\_\_

Date Confirmation Sent: \_\_\_\_\_

District Date Received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_

Mailing: P.O. Box 1648, Dripping Springs, Texas 78620 Physical: 14101 Hwy. 290 W., Bldg 100 Suite 212, Austin, TX. 78737

Office (512) 858-9253 FAX (512) 858-2384  
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Revised 03/28/2018  
Server/Documents/Forms/Utility Connections