

**APPLICATION FOR UTILITY METER DEPOSIT WAIVER
TOWN OF BOONE, N.C.**

DATE _____ ACCOUNT # _____

NAME _____

METER LOCATION _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

LOCAL PHONE _____ HOME PHONE _____

SOCIAL SECURITY # _____ DL NO. _____

PERMANENT ADDRESS _____

CITY _____ STATE _____ ZIP _____

RENTER:

Bills are mailed each month, are due when received, and are to be paid by the past due date indicated on the front of the bill. Your account is subject to a late penalty after the due date. If not paid within thirty (30) days of the past due date, service is subject to termination and a connect fee will be charged before serviced is restored. There is a \$20 charge for a disconnection or connection and a \$10 charge for meter re-read or leak check. If service is disconnected for non-payment there is a \$40 reconnection fee.

RENTER'S SIGNATURE _____ DATE _____

SPONSOR:

I, _____ hereby sponsor the Town of Boone utility service for the party and location stated above. In requesting sponsorship, I certify that I own real property within the Town of Boone and I accept full responsibility for charges, fees, penalties, or obligations incurred by this account.

SPONSOR'S SIGNATURE _____ DATE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ ACCOUNT # _____

**567 WEST KING STREET – PO DRAWER 192, BOONE, NC 28607
PHONE:(828)268-6220 FAX: (828)268-6224**