



**Town of Alpine
Water/Sewer Department
Account Transfer Application**

I request to make a transfer of the following water/sewer department account from the previous lot owner into my name. I agree to follow all rules and regulations of the municipality pertaining to the use of such water and, if applicable, sewer services.

****PLEASE ATTACH A COPY OF YOUR DEED TO THE PROPERTY FOR VERIFICATION OF OWNERSHIP****

Name of Applicant: _____

Mailing Address: _____

Home Telephone #: _____ **Work Telephone #:** _____

Lot #: _____ **Subdivision:** _____

Physical Address: _____

Previous Owner: _____

Account Number: _____

By signing below, I understand and agree to the following: Billing Procedures-Owners are responsible for water bill (sewer bill also if applicable). Bills will be computed and mailed to all customers no later than the fifth (5th) day of the month. Payment will be due on the fifteenth (15th) day of the month. Payments received after the twenty-fifth (25th) day of the month will be assessed a \$5.00 late charge. All billing is in arrears. For example, January's water/sewer usage is billed the beginning of February. A customer will be advised of a disconnect order upon delinquent accounts. Please note a \$30.00 connection fee will be assessed on past due accounts that are shut-off. Reference: 200-Ordinance No. 2010-02

Applicant Signature: _____

Date: _____

Transfer Fee \$25.00

Check #: _____ Cash Receipt #: _____