



Town of Alpine

Request for Water Services ~ Reinstatement

I _____ would like the Town of Alpine to reinstate
(turn on) my water services at my Residence/Business, located at:

_____ effective on (date): _____

The Town of Alpine requests that the owner and/or representative be present when the water service is reinstated. The consumer understands and agrees that all balances will be paid in full prior to any reinstatement.

If you have any questions or comments please feel free to call the Town office, at the number listed below, or stop by the office at any time.

Thank you,
Town of Alpine Staff

Signature: _____

Address: _____

Date: _____

Contact Number: _____

For office use only:

Town Employee Signature: _____

Date & Time Water Turned On: _____

Representative Present: _____