

Eastern Pines Water Corporation

New Customer Application

Please complete application in full. (Please Print)

All information is required for service to be activated or additional deposit is required.

Name: _____

Property Address: _____

City: _____ N.C. Zip Code: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (H) _____ (C) _____ (W) _____

Date of Birth: ____ / ____ / ____ SSN: ____ - ____ - ____

Effective Date: _____ Tax ID: _____

(Payment must be received before service is restored or read in your name)

Signature: _____ Date: _____

Print: _____ Bank Draft: Yes / No
(Additional form must be completed for draft)

Mail Completed Application and \$85 Payment to:

Attn: New Service

Eastern Pines Water Corporation

5442 Eastern Pines Road

Greenville, N.C. 27858

(Includes \$50 Deposit and \$35 Service Charge)

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New construction - please provide:

Subdivision: \_\_\_\_\_

Lot Number: \_\_\_\_\_

Contractor: \_\_\_\_\_

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*~ For office use only ~*

Account Number: \_\_\_\_\_ Received/Completed By: \_\_\_\_\_

Work Order Number: \_\_\_\_\_

*“EPWC is an equal opportunity provider and employer.”*