

**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 to:**  
**Attn: New Service**  
**Eastern Pines Water Corporation**  
**5442 Eastern Pines Road**  
**Greenville, N.C. 27858**

**Tap Fees:**  
**3/4" - \$1,050.00**  
**1" - \$1,200.00**  
**2" - Request Quote**

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."*