

550 Bethlehem Road
P.O. Box 46
Douglas, AL 35964
256-593-5010

DOUGLAS WATER AUTHORITY

Office Hours:
7:00 AM until 4:00 PM
Monday thru Friday

1. Meters are read and billed each month, stating the amount due, consumption, delinquent date and amount. Bills are mailed by the 1st of each month and are delinquent after the 12th. A final notice will be mailed after the 16th and a fee will be charged to cover this extra expense. All accounts not RECEIVED in our office before 9:00 AM on the 25th of each month – **WILL BE DISCONNECTED**. There will be additional charges to cover the collection of the account and, if necessary, legal action will be taken at the customer's expense.
2. We will not be responsible for the postal system's mistakes. Failure to receive the bill will not relieve the customer of payment obligation, nor will we make allowances for payments that have been mailed, but not received in our office. We have a night depository available but advise customers to pay with a check in order for them to have a receipt.
3. Returned Checks will be regarded as unpaid bills. The customer will be charged for each time a check is returned and after five returned checks, the customer will be put on a cash basis.
4. The service, (meter, box, lid, etc) does not belong to the customer, but remains the property of this Authority. Any damage inflicted to the service or connecting lines from the main will be billed to the customer. It is the responsibility of the customer to maintain the service in such a way as to keep it accessible to our department at all times. (Example: No fence or locked gates between road and meter.)
5. In accordance to the published rate ordinance, only one residence and/or business may be served from one water service. Should we find this regulation abused, we will bill accordingly.
6. The State Health Department requires a PHYSICAL DISCONNECT between any public water supply and private system, such as a well.
7. All customers are required to have a CHECK VALVE in the supply line to their water heater to prevent back-flow of the water and the resulting drained tank. We will not be responsible for water heater elements that are damaged when the water is drained from the customer's tank.
8. All customers are required to install a CUT-OFF DEVICE on the service line between the water service and the residence, for those occasions when the customer wishes to cut-off their own water supply for repair etc. It is also our recommendation that pressure reducers be installed on the customer's line.
9. Our service personnel will be happy to answer customer's calls or questions and to assist them with any problem pertaining to their water service. However, in the event the problem is found to be the customer's responsibility, and a trip to the service location is necessary, the customer will be billed.
10. The customer acknowledges that the water authority does not warrant or insure water to a customer and that at times, when repairs are necessary, an interruption of service may be unavoidable. If an interruption of water service would be harmful or disastrous to a home or business, an alternative source of water for such emergencies would be advisable.
11. This application for water service becomes a binding contract for the services provided by this utility authority and constitutes an agreement to abide by the rules and regulations governing these services, including timely payments and reasonable and diligent protection of utility metering and other equipment at the service location. Billing will be at current rates for class of service as adjusted periodically. Any or all of the fees, rules or regulations listed are subject to change without prior or public notice.

I understand that I, as the CUSTOMER, will be responsible for payment of billings, as long as this service is listed, by this Authority, in my name. I am either the person listed as the customer, or I have been authorized by that person to execute this contract. I am of legal age and understand the conditions of this service application and the rules and regulations of this utility authority.

CUSTOMER NAME (first, middle or maiden, last)

HOME PHONE NUMBER SOCIAL SECURITY NO.

SPOUSE NAME (first, middle or maiden, last)

PLACE OF EMPLOYMENT PHONE NO.

MAILING ADDRESS

OWNER OF PROPERTY (if different from customer)

CITY STATE ZIP

NAME OF NEAREST RELATIVE IN AREA

SERVICE ADDRESS (if different from above)

RELATIONSHIP PHONE NO.

SIGNATURE OF CUSTOMER

UTILITY PERSONNEL DATE

ACCOUNT NUMBER CUSTOMER NO.

CONNECTION FEE NON-REFUNDABLE

INITIAL if you would like to make a donation of \$1 per month to the VOLUNTEER FIRE DEPARTMENT in your area. This will be added to your monthly billing and will go directly to the fire department.

NEW SERVICE _____ CONNECTION FEE _____
SERVICE CHARGE _____ OTHER _____
TOTAL DUE _____ PAID _____

