Gerald Griffin, *President*

Jerry Deal, Vice *President*

**BON AQUA-LYLES UTILITY DISTRICT**

P.O. BOX 35

LYLES, TENNESSEE 37098 (931) 670-3957

Mike Capps, *Sect. Treasurer*

Brad Barnes, *Manager*

e-mail: **bonaqualylesutility@yahoo.com**

 website: **bal-ud.com**

**APPLICATION FOR A WATER TAP**

I request the Bon Aqua Lyles Utility District to provide water service at the property known as

APPLICANT AGREES TO:

1. Pay the applicable fee and service fee

2. Connect to the water system at the meter when installed to serve the above property and install his own service line from the meter to the place of actual water use.

3. Begin using water immediately after the tap is installed.

4. Comply with the District's by laws, rules, regulations, and policies. Pay promptly bill at such rates, time and place as shall be determined by the District's governing body. The present rate schedule is: 100 to 1,500 gallons $24.07 plus tax, All above 2,000 $11.50 per thousand and $1.15 per hundred.

5. Comply with the requirements of the Tenn. Dept. of Public Health that the applicant's existing

Water lines will in no way be connected to the Association's lines when service becomes available

6. Grant the District the right of ingress and egress necessary for the District to successfully operate and maintain its water lines and appurtenances.

ASSOCIATION AGREES TO:

1. Furnish and install a tap into the District's main lines and a complete water meter installation at or near the applicant's property line.

2. Operate and maintain the water system so as to provide water to all users in a business like, adequate and non-discriminating manner.

MUTAL AGREEMENTS:

1. The District will furnish a minimum of 20 feet of service line between the District's main and the meter assembly. Applicants requesting meter installations at a greater distance than 20 feet will pay all additional costs necessary to provide adequate water service to the applicant's Property and will obtain any easements or right of way that may be required with this service.

2. The District's indebtedness on the waterworks system will not be a lien on the applicant's property.

CONNECTION FEE \_\_\_\_\_\_\_\_\_\_\_\_\_\_ TAP FEE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TOTAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNED \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BON AQUA LYLES UTILITY DISTRICT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bon Aqua Lyles Utility District**

P. 0. Box 35

Lyles, Tennessee 37098

931-670-3957

Fax No. 931-670-3959

e-mail: **bonaqualylesutility@yahoo.com**

 website: **bal-ud.com**

Date

Name

Phone

Service Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driver's License # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer's Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Spouse Social Security # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Name and Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant is Owner Renter Other

Owner of Property

The date you want service to begin

I hereby apply for service at the above address and agree to abide by the rules and regulations governing such services. I the undersigned, agree that in the event of default in payment of any amount due, this account will be placed in the hands of an agency or attorney for collections or legal action, to pay an additional charge equal to cost of collection including agency and attorney fees and court costs incurred and emitted by laws governing these transactions.

The undersigned hereby certifies that he/she at the present time does not owe Bon Aqua-Lyles Utility District for prior service and further certifies that this application is his/her bon a fide application and not submitted in conjunction with or on behalf of another person who has had water service terminated by this department for failure to pay a water bill. He/she further certifies that in the event this is a false application He/She understands and agrees that water service may be terminated by the department.

This connection fee paid for water service is Non-Refundable or Transferable.

Applicant Signature (Responsible Party) Bon Aqua-Lyles Utility

**Bon Aqua-Lyles Utility District**

P. 0. Box 35

Lyles, Tennessee 37098

931-670-3957

Fax No. 931-670-3959

e-mail: **bonaqualylesutility@yahoo.com**

 website: **bal-ud.com**

**Notice to all Customers**

**Business hours**

7:00a.m. till 3:30p.m. Monday thru Friday

The office will be closed from 12 (noon) to 1p.m. but the **drive thru is open at this time.**

You will receive your water bill the first day of each month. Payment is due by the 10th of each month. If payment is not made by the 10 th there will be a 10% penalty (late charge) added to the bill.

If your bill is not paid by the 20th of each month, your service will be terminated the next working day. There will be a $50.00 charge to re-instate this service during business hours. The Bon Aqua Lyles Utility district does not re-instate service after business hours.

The board of commissioners meet the 3'd Thursday of each month at 6:00p.m. at the District's office located at7964 Spotlight Road, Lyles, Tn.

100 to 1,500 gallons

All above 2,000 gallons

$24.07 plus tax

$11.50 per thousand $1.15 per hundred

**AFTER HOUR EMERGENCY PHONE NUMBER IS 931-670-3142.**

**YOU WILL RECEIVE ONLY ONE BILL**

**WE DO NOT SEND OUT PAST DUE NOTICES FOR DELIQUENT ACCOUNTS**

The fee to establish water service is non-refundable and cannot be applied toward a final billing.

If you ever move to a different address, you will have to pay another service fee at the new address.

**When you establish service, you will be charged a minimum bill even if you do not use water.**

**Signature \_ Date**

**Water System Cross-Connection Survey Residential**

e-mail: **bonaqualylesutility@yahoo.com**

 website: **bal-ud.com**

**Occupant Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Occupant Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Meter serves: Homes How Many?

Buildings How Many?

1. Do you have? (Please Check **all** that apply):

Hot Tub Swimming Pool Jacuzzi

Waterbed Solar System

 Green House

Underground Sprinkler

System

Portable Dialysis

Machine

Wood burning hot water heater

Darkroom Equipment

Insecticide Sprayers (That attach to garden hose also)

Ghost pipes (unidentified)

 Drip/Soaker/Irrigation System

 Utility sink w/threaded faucet

2. Do you have bathtub that fills from the bottom? Yes No

3. Do you have a water softener or any extra water treatment system? Yes No

4. Do you have an auxiliary water supply on your premises? Yes No

5. Do you have livestock and use a water trough or water system connected to by public water?

Yes No

6. Is your home or building elevated above your water meter? Yes No

7. Does a creek, river, or springwater run near or on your property? Yes No

8. Do you have a booster pump, well pump, or any other type water pump? Yes No

9. Do you receive irrigation water from a different source? Yes No

10. Do you have a backflow protection device on your property now? Yes No

11. Do you have any situation that you are aware of that could create a cross-connection? Yes No

12. Do you have any other water-using equipment on your property not mentioned above? Yes No

If yes, please list below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Print Name Phone # (include area code)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date

**Please notify this office if any of the above conditions change.**