



UTILITY BILLING DEPARTMENT

REMIT TO:
VILLAGE OF ANGEL FIRE
PO DRAWER 489
ANGEL FIRE, NM 87710
575-377-3232

WATER AND/OR SEWER SERVICE APPLICATION AND AGREEMENT
NEW RENTER/PROPERTY MANAGEMENT APPLICATION

REQUESTED SERVICE DATE ___/___/___

*SERVICE ADDRESS
SUBDIVISION BLOCK LOT# HOUSE # AND STREET NAME

[] WATER SERVICE

[] SEWER SERVICE

*RENTING FROM
LAST FIRST MI

*BILLING ADDRESS
STREET / PO BOX

CITY STATE ZIP CODE

*PHONE: ()

*TENANT
LAST FIRST MI

*BILLING ADDRESS
STREET / PO BOX

CITY STATE ZIP CODE

*PHONE: HOME ()
WORK ()

EMAIL:

*DRIVERS LICENSE # STATE

PROPERTY MANAGER:

NAME

ADDRESS

PHONE ()

OFFICE USE ONLY
PLEASE DO NOT WRITE IN THIS BOX
ACCOUNT #
ROUTE SEQ
METER #
REMOTE #
METER SIZE
METER READING
DEPOSIT-W/S# \$ 100.00
DEPOSIT REFUSE \$
TOTAL \$
VILLAGE OF ANGEL FIRE
AUTHORIZED REPRESENTATIVE

COPY OF AUTHORIZATION BY OWNER FOR PROPERTY MANAGER OR HOA AGREEMENT RECEIVED? [] Y [] N

Agrees to pay all applicable rates related to general metered service, disconnect and reconnect charges. It is the responsibility of the applicant to notify the Village of Angel Fire if service is to be terminated.

APPLICANT'S SIGNATURE DATE

* MUST BE FILLED-IN COMPLETELY