



# CITY OF NAHUNTA

9911 NORTH MAIN ST~P.O. BOX 156  
NAHUNTA, GEORGIA 31553  
PHONE: 912-462-5631~FAX: 912-462-7189

## REQUEST TO TRANSFER

Today's date: \_\_\_/\_\_\_/\_\_\_

Name: \_\_\_\_\_

Transfer applications will **not** be accepted or services turned on without the following:

- Account is current**
- Rental/lease agreement** – if you do not own the property where service will be established, a copy of the rental/lease agreement must accompany this application

Owner's name \_\_\_\_\_ Telephone #: \_\_\_\_\_

- Deposit of \$75.00 for water, \$75.00 for sewer (If a deposit is not already on file)** – cash, check, money order, Visa, MasterCard, and Discover accepted (there is a service fee for all card payments).

### Transfer of services

Date to start service at new address \_\_\_/\_\_\_/\_\_\_

New Service Address: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell# \_\_\_\_\_

Do you:  rent  own

### Disconnection of services

Date to stop service at current address \_\_\_/\_\_\_/\_\_\_

Current Service Address: \_\_\_\_\_

I understand, and hereby agree to the following: (1) falsification of any information on this form may result in immediate disconnection without notice; (2) failure to pay account in accordance with the City of Nahunta's policies will result in disconnection of service; (3) all water going through the meter is the customer's responsibility – any leaks that are repaired may be given a cost adjustment on the sewer portion of the bill upon submittal of repair receipt and verification of repair; (4) failure to pay final bill will result in account being submitted to collections – I will as a result, be responsible for all late charges and collection costs; (5) no one living in my household has an outstanding balance owing to the City of Nahunta; (6) deposits are refunded on final bill and could take up to 60 days to process.

Signature: \_\_\_\_\_

### For office use only

Account# \_\_\_\_\_

Route/Seq# \_\_\_\_\_

Residential

Commercial

Start read \_\_\_\_\_  
(At new address)

End read \_\_\_\_\_  
(At previous address)

### DEPOSIT

Amount paid \$ \_\_\_\_\_

Date Paid \_\_\_/\_\_\_/\_\_\_

Cash

Check # \_\_\_\_\_

Card (last four) # \_\_\_\_\_

Transferred to new address

### Services Requested

Water

Sewer

All bills are due and payable the **15<sup>th</sup>** of each month. A 10% late fee will be applied on the 16<sup>th</sup> of the **month**. Accounts not paid in full, by the **15<sup>th</sup>** will be disconnected the **Monday following the 15<sup>th</sup>** with **no exceptions**. If disconnected the full amount and reconnect fee must be paid in full before services will be restored without exception.

