

City of Richmond Hill
PO Box 250
Richmond Hill, GA 31324

Temporary Service Application
(90 day service)



Account Number: _____

Date Service to Begin: _____

Customer Name: _____

Service Address: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Email: _____

Signature of Applicant

Date

FOR OFFICE USE ONLY	
Application Fee collected by: _____	Date: _____
<input type="checkbox"/> Check # _____	<input type="checkbox"/> Cash <input type="checkbox"/> Visa <input type="checkbox"/> M/C <input type="checkbox"/> Debit <input type="checkbox"/> Discover
Receipt #: _____	Beginning Reading: _____

It is the applicant's responsibility to ensure that there is no water sources turned on inside the home/property upon connection of services. The City of Richmond Hill accepts no liability for any water damage.