

Alaska Rural Utility Collaborative Division of Environmental Health & Engineering

4500 Diplomacy Drive, Suite 130 Anchorage, Alaska 99508

Telephone: 1-866-205-7581 Direct Line: 1-907-729-4041

Facsimile: 907-729-4506 or 907-729-4090

Residential Utility Service Agreement

This Agreement is made between Alaska Rural Utility Collaborative (ARUC) as the Utility and
as the Applicant. The Applicant requests that their residence be connected to the Utility's water/sewer system.

As part of the request, the Applicant agrees:

- 1. To abide by the water and sewer ordinances, rules, and policies adopted by the ARUC.
- 2. To pay the Utility a monthly service fee for water/sewer at the rate established by the utility for residential customers.
- 3. To pay any deposits required by the Utility prior to connection of service.
- 4. That delinquent bills (more than 30 days past due) are subject to collection actions. These actions can include, but are not limited to, late payment fees, deposit forfeiture, and disconnection of service.
- 5. To maintain the plumbing on the Applicants property and within the residence to the Arctic box or curb stop and/or sewer main, including all plumbing, piping, fixtures, and other appurtenances intended to carry water, sewage, wastewater and drainage in accordance with the Uniform Plumbing Code.
- 6. To use heat tape and maintain adequate insulation for the system to prevent freezing during the winter.
- 7. That by signing this Agreement, the Applicant grants to the Utility, its officers, employees, agents and assigns, the right of ingress and egress to the property and residence for purposes of inspection, repairs, connection or disconnection of piping, plumbing, fixtures and other appurtenances intended to carry water, sewage, and waste water. The ingress and egress shall be at a reasonable time, and whenever possible the Utility shall provide advance notice of any inspection.

All bills, invoices, statements, notices or correspondence shall be sent to the respective parties at the address stated below: Type of Connection: _____ Water & Sewer ____ Water / Sewer Only (Circle one) ____ Watering Point **Customer Last Name** First Name Middle Initial Date of Birth **Social Security Number Drivers License Number and State Phone Number Customer Signature Date Service Begins Water Plant Operator Signature** Date SERVICE ADDRESS: **BILLING ADDRESS:** Block _____ Lot____ P.O. Box / Street / Apartment Number Community City / State / Zip For Office Use Only

New Account Number:

Revised: 9/11/2014

Monthly Service Charge:

Date Received:

Entered By: