



**Cavland Environmental Authority, Inc.**

P O Box 426 ~ Cave City, Kentucky 42127 \* (270) 773-2887 (p) \* (270) 773-2283 (f) \* www.ceawater.com

**SERVICE APPLICATION**

**PRIMARY APPLICANT:** \_\_\_\_\_  
\*\*\* Full Legal Name Required (FIRST MIDDLE LAST)

**D.O.B.:** \_\_\_\_\_ (mm/dd/yyyy)  
\*\*\* A valid photo identification is required for all applicants, and will be photo copied for our records

**\*JOINT or \*\*AUTHORIZED APPLICANT:** \_\_\_\_\_  
\*\*\* Full Legal Name Required (FIRST MIDDLE LAST)

\*A Joint applicant will have all rights to the account as primary applicant   
\*\*Authorized applicant will have limited rights to acct information for balance and payment only

**D.O.B.:** \_\_\_\_\_ (mm/dd/yyyy)  
\*\*\* A valid photo identification is required for all applicants, and will be photo copied for our records

**SERVICE ADDRESS:** \_\_\_\_\_ **OWN RENT**  
MUST BE EXACTLY AS 911 EMERGENCY SERVICE ADDRESS (PLEASE CIRCLE ONE)

**PHONE NUMBER (AREA CODE):** \_\_\_\_\_ \*\*\*A minimum of one valid contact number is required for all accounts regardless of whether or not the telephone number provided is registered to the applicant(s).

**MAILING ADDRESS (IF DIFFERENT FROM ABOVE):** \_\_\_\_\_

**ALTERNATE CONTACT INFORMATION:** \_\_\_\_\_  
(NAME) (AREA CODE AND TELEPHONE #)

As the applicant(s) for service, I/we understand and agree that I/we am/are willfully entering into a service agreement with Cavland Sanitation Authority, Inc. dba Cavland Environmental Authority requiring that I/we abide by all rules and regulations as established by the directors and/or officers of Cavland Environmental Authority. I further understand and agree that I/we am/are expected to make payments for all services provided on or before the due date as determined by the service address billing cycle and indicated on my/our monthly statement. A 10% penalty shall be applied to all balances remaining on the next business day following the regular due date, and it is solely the responsibility of the applicant(s) to ensure that all services are paid in full on a monthly basis by the appropriate due date regardless of whether or not he or she receives a statement from Cavland Environmental Authority. Any and all information included in this service application and/or otherwise obtained by Cavland Environmental Authority shall be used for the purpose of collecting any and all debts owed on this account. Cavland Environmental Authority expressly reserves the right to disconnect, confiscate unauthorized devices, and/or discontinue service or any other connection with or without notice where the Utility discovers, finds or is otherwise made aware of any such installation that poses a threat to the supply, public health or public safety. The Utility cannot guarantee uninterrupted service and will not be responsible for any claims arising out of the failure to deliver continuous service.

\_\_\_\_\_  
**SIGNATURE PRIMARY APPLICANT DATE SIGNATURE JOINT APPLICANT DATE**

Through my signature I/we acknowledge that I/we have read, understand, and agree to all statements above and I/we further acknowledge that all information contained herein is true and correct to the best of my/our knowledge.

DEPOSIT RECEIVED: WATER \$ \_\_\_\_\_ SEWER \$ \_\_\_\_\_ RECEIPT # \_\_\_\_\_

ACCOUNT # \_\_\_\_\_ --- \_\_\_\_\_