Eastern Bartholomew Water Corporation
2413 W 700 N, PO Box 487
Taylorsville, IN 47280
Phone (812)526-9777

NEW SERVICE APPLICATION

Today's Date: _____

Name: _____

Phone: _____ ALT: _____

Service Address: _____

Mailing Address: _____

Email Address: _____

Current Member of EBWC: YES**: _____ NO: _____**

Sewer Provider **(circle one): Columbus City Driftwood Hartsville Hope E-Town Septic**

Connection Type: Residential: _____ Commercial: _____

Signature: _____

CHECKS WILL BE PROCESSED IMMEDIATELY. IF FOR SOME UNFORESEEN REASON THE METER IS NOT INSTALLED, YOUR ORIGINAL FEES WILL BE REFUNDED TO YOU.

Please attach a copy of your driver's license.

Once we have all the paperwork back and your account set up, we will give you a call to make an over-the-phone payment. If you are renting it is a $30 transfer fee, if you are buying the home, it is $100 membership fee. If you already have a membership with us, then it will be a $30 transfer fee.

For OFFICE USE ONLY - ROUTE# 1 2 3 4 5 6 7 8 9 10 11 12 13

Account Number: _____ Location Number: _____

Meter Set Payment Amount: _____ Membership Payment Amount:_____

Method of Payment (Circle one): Credit/Debit Cash Check

Authorization #: _____ Check #: _____ Date Paid: _____