

## **Service Contract**

Name:		Account #:		
Address:	Pl	hone Number: _		
SS#:	D	river's License or	· ID #:	
Employer Name:	Er	mployer Phone #	:	
Do you have an in-grou	und Sprinkler System?	Yes No (		
Do you plan to install o	ne?	Yes No (		
This deposit is refundable monthly. Failure to receive of the month. A 10% Pen or discontinued if it is defunced utility bills. If The total amount due in problems, water leaks, o	e when you leave the system re your Utility Bill does not E alty will be charged if not pattermined that the applicant service is disconnected, a \$ nust be paid before servicer damages past the meter EPW must have access to the	n, after the utility bil Exempt Payment. A aid by the 10 <sup>th</sup> of the nt or person residi 550.00 reconnection ce is restored. If are my responsib	mer shall pay a security deposit. Il is paid in full. You will be billed All Utility Bills are due by the 10 <sup>th</sup> e month. Service may be denied ng at this service location owes on will be added to the Utility Bill. further understand that electricility. I understand that to avoid ter meters for proper readings.	
CPW offers Equal Paymer \$35.00 service charge for	nts Bank Draft or Actual Am all returned checks or draft	ount Bank Draft fo payments. The CP	rds for Utility Bill Payments. The r Utility Bill Payments. There is a PW will not accept checks or draft e last returned check or draft.	
compliance with Federa monitoring and statistic encouraged to do so. I required to note the inf	ormation on the basis of vis	nation. This inform equired to furnish t sex, under Federa ual observation or	nation is used only for his information but are al regulations, this company is surname.	
"This is an Equal Oppo	ortunity Program"	) I do not wish to fu	urnish this information.	
Ethnicity: Please indicate	ate the number of people li	ving in the househ	old.	
Head of Household	Male		Female	
	Hispanic or Latino	/ -	Not Hispanic or Latino	
	Black/African Ame	4	White	
	Native Hawaiian or Other Pacific Islander			
	American Indian or Alaska Native			
	Other			
Gender:	Male		Female	



## Service Contract Signature Page

By signing this application for **Electric, Water, Sewer and/or Trash Service,** the applicant agrees to pay all of the costs associated with the collection of the applicant's unpaid bills. The McCormick Commission of Public Works has the right pursuant to the South Carolina Setoff Debt Collection Act to collect any sum due and owed by the applicant through offset of the applicant's state income tax refund. If the McCormick Commission of Public Works chooses to pursue debts owed by the applicant through the Setoff Debt Collection Act, the applicant agrees to pay all fees and costs incurred through the setoff process, including fees charged by the Department of Revenue, the South Carolina Association of Counties, the Municipal Association of South Carolina, and/or the McCormick Commission of Public Works. If the McCormick Commission of Public Works chooses to pursue debts in a manner other than setoff, the applicant agrees to pay the costs and fees associated with the selected manner as well.

Applicant Name	Address	
Applicant Signature	Date	