

# HARDY COUNTY PUBLIC SERVICE DISTRICT

45 District Drive  
P. O. Box 900, Moorefield, WV 26836  
Phone: 304-530-3048 Fax: 304-530-3046

## APPLICATION FOR WATER SERVICE

### THIS SECTION TO BE COMPLETED BY APPLICANT

Name _____	Spouse/Other _____
Address _____	Phone # _____
_____	Date of Birth _____
Phone # _____	SS # _____
Email _____	Employment _____
Date of Birth _____	Work Phone # _____
SS # _____	Is this a rental property? _____
Employment _____	If yes, name of owner _____
Work Phone # _____	Owner phone # _____
Nearest relative not living with you _____	
Address _____	
_____	Phone # _____
Are you running an entirely new service line or connecting to an existing service line? _____	
Existing Service line material _____	Year home was built _____

### THIS SECTION FOR HCPSD OFFICE USE ONLY

Existing Tap / New Tap _____	Residential / Commercial / Industrial / Public Authority _____
Meter Address _____	Account # _____
Meter ID # _____	Previous Cust. _____
System _____	Map/Sheet _____
Security Deposit \$ _____	Date Paid _____
Tap Fee \$ _____	Date Paid _____
Date turned on _____	Date of first bill _____

The applicant hereby authorizes service to be established in their name(s) at the above property location and agrees to pay for service until discontinued. The applicant further agrees to comply with and be bound by the rules and regulations of the Hardy County Public Service District, the West Virginia Bureau for Public Health and the Public Service Commission of West Virginia.

The applicant understands the District installs check valves at the meter to prevent water from flowing back into the District’s water lines from an applicant’s premise in an effort to prevent potential health risks and that in doing so a closed system is created for the applicant which could result in thermal expansion (increased pressure) in the applicant’s water system, potentially causing the pop-off valve on hot water tanks to release and/or causing an explosion. The applicant understands and is aware of these potential hazards. In order to prevent these potential hazards applicants may need to install a pressure bypass valve or an expansion tank to prevent thermal expansion.

The applicant agrees that no other present or future source of water will be connected to any of the applicant’s water lines served by the District and the applicant will disconnect from all present water systems prior to connecting to the District’s system and will eliminate any present or future potential cross connections in the applicant’s system. The applicant further agrees to install an approved backflow prevention device in an approved manner if water service is to be used at an animal feeding operation, such as a poultry house, or in any other manner that the District deems as potentially hazardous. The applicant agrees to abide by any determination made by the District regarding the need for a backflow prevention device. Failure of the applicant to comply with any portion of this regulation will result in the District discontinuing the applicant’s service, in accordance with State regulations.

APPLICANT’S SIGNATURE _____	DATE _____
APPLICANT’S SIGNATURE _____	DATE _____
UTILITY REPRESENTATIVE _____	DATE _____

The following information is requested by the federal government in order to monitor compliance with federal laws prohibiting discrimination against applicants seeking to participate in this program. You are *NOT* required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required by the federal government to note the race/national origin of applicants on the basis of visual observation or surname.

**Please Mark the Race and/or Ethnic Background that best characterizes you:**

Caucasian/White _____	African American/Black _____
Hispanic/Latino _____	Hawaiian /Pacific Islander _____
Asian _____	American Indian/Alaska Native _____
Other: _____	