LOUISIANA WATER COMPANY

APPLICATION FOR COMMERCIAL WATER SERVICE

Please check service area:

☐ Crowley ☐ DeQuincy ☐ Eunice ☐ Lecompte ☐ Loreauville ☐ Mansura ☐ New Iberia

Please check type of service:

☐ Primary Domestic Service ☐ Second Domestic Service ☐ Lawn sprinkler / Irrigation Service

Company Name _____

Service Address _____

City _____ State _____ Zip _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ Fax/E-mail _____

Parent Company Name _____

Parent Company Address _____

City _____ State _____ Zip _____

Tax ID No. _____ Incorporated _____ Non-Incorporated _____

Do you want to have your bank account drafted for your monthly bill? Yes _____ No _____

OFFICERS/OWNERS/PARTNERS

Name _____ Address _____

SS# _____

Name _____ Address _____

SS# _____

The undersigned hereby requests Louisiana Water Company to render water service at the above address and agrees to receive from and pay the Company for all such services required on the premises at the above address, in accordance with the applicable rates and with the service regulations of the Company (a copy of the current rates and service regulations are available upon request). The undersigned also understands that, should no one be at the premises when the serviceman connects the water service, all water faucets and all other water outlets should be turned off or closed by the customer.

It is also agreed and understood that equipment installed by the Company is used solely for company purposes and does not include a backflow prevention device. The Customer shall install an approved back flow prevention assembly at the service connection to the public water supply or immediately downstream of the service connection. The type of back flow assembly will be commensurate with the degree of hazard and must be approved by the Company. The Customer shall install a reduced pressure principle backflow prevention assembly to protect against the highest degree of hazard if the Company cannot determine the end use of the commercial service or if the Company determines that the end use of the commercial service could change. It is understood by the Customer that all backflow prevention devices shall meet the requirements of all applicable state and local codes or ordinances for water service including, but not limited to, the Louisiana State Plumbing Code and the Louisiana State Sanitary Code. Prior to initiating service, the Customer will be required to forward certification, signed by a certified and licensed Louisiana Master Plumber and a licensed Water Supply Protection Specialist, stating that the installation is in compliance with all applicable codes. The Customer understands and acknowledges that the Louisiana State Plumbing Code requires that all backflow prevention devices are to be tested annually or more frequently if required in the Plumbing Code and that the results of test are to be submitted to the proper plumbing official and Louisiana Water Company, in a timely manner.

_____ _____

Applicant's Signature Date

OFFICE USE ONLY

Account No._____

Deposit # _____ Amount $_____

CSR _____ Date_____