



To establish service, **property owners** must provide the following information:

1. **A physical e911 property address.**
2. **Proof of property ownership.**
 - If the property owner is deceased, documentation showing administration of estate will be required.
3. **A valid government-issued photo ID** for each person to be listed on the WSG account.
4. **A social security number** for each person to be listed on the WSG account.
 - Applicants utilizing a **Tax ID** or **EIN** are required to provide a legal document that confirms their ownership of the respective Tax ID or EIN.
5. If services at the address are already active, **written authorization from the current WSG account holder is required.**
 - WSG cannot transfer services into a new name unless either the existing account holder has provided written permission or their WSG account has been closed.

All individual(s) requesting services or to be listed on the WSG account must be present to apply for WSG services.

- If an individual cannot be present, a signed letter authorizing a representative to apply on their or their company's behalf will be accepted.
 - The representative must submit all required documentation for the absent individual or company.
 - The representative must also provide a valid government-issued photo ID.

Required deposits must be paid at the time service is established. Accepted forms of payment are cash, check, money order and with an additional fee, Visa, Master Card, or Discover. The deposit amounts are as follows:

	Required Water Deposit	Required Gas Deposit
Residential	\$100	\$125
Commercial	\$300*	\$300*

** Commercial properties require a minimum deposit of \$300 for water and \$300 for gas. These amounts may be adjusted based on anticipated utility consumption. Exact deposit amounts will be determined by Scottsboro WSG management upon request for services. After one year, WSG may re-evaluate consumption levels, which could result in a request to increase the deposit on file.*

In the event a deposit payment is returned to Scottsboro WSG for any reason, utilities will be disconnected immediately, and checks will be forwarded to the Jackson County DA for collection.

Any **outstanding balance** discovered during the process of establishing an account **must be paid in full** at that time.

Requests for service(s) along with required documentation listed above may be submitted via email to csr@scottsborrowsg.com. Deposits paid online will incur a convenience fee. For more information, please email customer service at csr@scottsborrowsg.com or call the office at **256-574-1515** or **256-574-1744**.



BUSINESS APPLICATION FOR SERVICE

Today's Date: _____ Date Utilities are to be turned on: _____

Property Address: _____

Do you ☐ own or ☐ rent this property?

Mailing address (If different from the property listed above): _____

Which utility services are you applying for? (Please mark all that apply):

☐ Water (for new wt taps, please specify size _____) ☐ Sewer ☐ Gas ☐ Garbage

Business name: _____

EIN or Federal Tax ID Number: _____

Does this business currently have an existing deposit on file with us that needs to be transferred to this new location? ☐ Yes ☐ No

If yes, from what address? _____

Primary business proprietor's information:

Name: _____

Social Security Number: _____ / _____ / _____ Phone (cell): _____

Email: _____ Phone (other): _____

Have you ever had utility services with us before? ☐ Yes ☐ No

If so, where? _____

Secondary business proprietor's information:

Name: _____

Social Security Number: _____ / _____ / _____ Phone (cell): _____

Email: _____ Phone (other): _____

Have you ever had utility services with us before? ☐ Yes ☐ No

If so, where? _____



Additional persons authorized to manage this account on behalf of proprietor(s):

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

Additional persons authorized to request account information for billing purposes only:

Name: _____ Title: _____

Email: _____ Phone: _____

Name: _____ Title: _____

Email: _____ Phone: _____

THIS APPLICATION FOR SERVICE, WHEN EXECUTED, BECOMES A LEGAL BINDING CONTRACT FOR THE SERVICES PROVIDED BY THE RESPECTIVE UTILITY BOARDS AND CONSTITUTES AN AGREEMENT TO ABIDE BY THE RULES AND REGULATIONS GOVERNING THESE SERVICES INCLUDING TIMELY PAYMENTS AND RESONABLE AND DILIGENT PROTECTION OF UTILITY METERING AND OTHER EQUIPMENT AT THE SERVICE LOCATION. BILLING WILL BE AT CURRENT RATES FOR CLASS OF SERVICE AS ADJUSTED PERIODICALLY. I REPRESENT THAT NEITHER I NOR ANY OTHER INDIVIDUAL WHO RESIDES OR STAYS IN THE HOUSEHOLD OWES WSG A DELINQUENT BILL. ANY MISREPRESENTATION HEREIN SHALL BE GROUNDS FOR DISCONTINUANCE OF SERVICE. IF SERVICE IS TERMINATED FOR NON-PAYMENT, A RETURNED CHECK, OR OTHER CAUSE, ADDITIONAL CHARGES WILL BE ADDED. IF LEGAL ACTION IS NECESSARY, COLLECTION COSTS INCLUDING A REASONABLE ATTORNEY FEE WILL BE ADDED TO AMOUNTS DUE. NO RECONNECTIONS AFTER NORMAL BUSINESS HOURS. SERVICE CONNECTIONS MAY BE WITHHELD UNTIL SERVICE CHARGES AND DEPOSITS HAVE BEEN PAID. A COPY OF OUR RULES AND PROCEDURES GUIDELINES ARE AVAILABLE UPON REQUEST.

I AM OF LEGAL AGE AND AM AUTHORIZED TO EXECUTE THIS AGREEMENT. I UNDERSTAND THAT I WILL BE RESPONSIBLE FOR PAYMENT OF BILLINGS. I HAVE READ AND UNDERSTAND THE CONDITIONS OF THIS SERVICE APPLICATION.

SHOULD YOU HAVE ANY QUESTIONS ABOUT SANITATION (GARBAGE) PLEASE CALL 256-259-5548.

Primary Signature: _____ Date: _____

Secondary Signature: _____ Date: _____

Application for Scottsboro Water Sewer Gas Board services along with required documentation listed on WSG's *Renter Requirements for Service* or *Property Owner Requirements for Service* may be submitted via email to csr@scottsborrowsg.com. Deposits paid online will incur a convenience fee.

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