

Sundale Mutual Water Company

PO Box 6708, Lancaster, CA 93539 Phone: (661) 256-3100 * Fax: (888) 786-8168 Sundalemutual@gmail.com * www.sundalemutual.com

New Meter Application

Date:		
Meter Size: 1" o	r1.5" * Building Permit#:	
Lot: Tract:	APN#	_
	BILLING INFO	<u>RMATION</u>
Owners on Title: _		
Mailing Address: _		
Cell Phone:	Home Phone:	Work Phone:
Email Address:		
all rates and charge A separate meter must be on file wit This meter must be paid in full.	es for the water service in accordance is required for each parcel served. h SMWC. e marked for installation within app	"SUNMC". I agree to use the water service and paye with the rates, rules, and regulations of SMWC. A completed, current <i>Will-Serve Letter Request</i> roval of your building plans and all fees have been
hold Sundale Mutu liabilities, damages	al Water Company harmless from an s, settlements, costs, fees and expense spenses, arising out of or related to a	s application and agree to defend, indemnify, and d against any and all claims, actions, demands, es, including reasonable attorney and expert my breach or claimed breach of this
Printed Name & Ti	tle:	
Signed & Date:		