



# Meadowhill Regional Mud District

THE NEXT GENERATION OF WATER & WASTEWATER UTILITY SERVICES

## New Service Utility Application

Today's Date: \_\_\_\_\_ Service Date is NEXT WORKING DATE: \_\_\_\_\_

NAME ON ACCOUNT: \_\_\_\_\_

NEW SERVICE ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Mailing address if different from service address: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE : \_\_\_\_\_

Email: \_\_\_\_\_

Texas Drivers License: \_\_\_\_\_ Last 4 digit of Social Security: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Are you a Landlord or Mangement Company: Yes \_\_\_\_\_ or No \_\_\_\_\_

Would you like paper bill \_\_\_\_\_ OR E-bill \_\_\_\_\_ (provide email address above please)

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Office Use Only: CSI APPROVED YES \_\_\_\_\_ OR NO \_\_\_\_\_

Turn off work order # \_\_\_\_\_ Turn on work order # \_\_\_\_\_

MUD # \_\_\_\_\_ Rep Initials \_\_\_\_\_ Verified lease \_\_\_\_\_ Verified ownership \_\_\_\_\_

CASH \_\_\_\_\_ CHECK \_\_\_\_\_ M/O \_\_\_\_\_ Credit Card \_\_\_\_\_

Account # \_\_\_\_\_ Entry Date: \_\_\_\_\_

Deposit: \_\_\_\_\_ Application Fee: \_\_\_\_\_ Total: \_\_\_\_\_

Service Address: \_\_\_\_\_ Name: \_\_\_\_\_



2815 Spring Cypress Rd # 3 Spring, Texas

**-CREDIT/DEBIT CARD PAYMENT FORM-**

**NEW PAYMENT METHOD! FILL OUT THE INFORMATION BELOW TO PAY YOUR DEPOSIT AND APPLICATION FEE WITH YOUR CREDIT/DEBIT CARD FOR A \$5 CONVENIENCE FEE!**

\*Grand Oaks Customers excluded. GRAND OAKS Please pay by cash/check/money order.

**PAYMENT INFORMATION**

Print Name (as it appears on your card):		Card Type: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover	
Card #:		CVV Code (3 digit security code):	Expiration Date (MM/YYYY):
Signature:		Date:	Email Required for CC Payment Confirmation:
Is the address on your credit/debit card the same as the above Service address? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please complete the address information below:			
Billing Address:	City:	Zip:	Home Phone:

PLEASE BE SURE TO PROVIDE YOUR PREVIOUS ADDRESS ZIP CODE – ZIP CODE ATTACHED TO THIS CARD

I authorize TNG Utility to debit my credit/debit card for a one-time payment on my account.  
Credit/debit card payments will incur a \$5 fee.  Yes  No

Authorized Signature: \_\_\_\_\_

\*TNG Utility Corp. does not keep this information on file. For Automatic Payment options please ask a representative for the correct form. Payment form above is for a one-time use only, after which, all credit/debit information will be destroyed for the customers' safety.