Moapa Valley Water District
Po Box 275. Logandale, NV 89021
Phone: 702-397-6893
Fax: 702-397-6894

WATER STATION APPLICATION

Applicant: _____ Date: _____
Billing _____ Phone: _____
Address: _____ Fax: _____
Project _____
Description: _____
Completion date _____

Water Station is Located at 2625 N Moapa Valley Blvd.

KEY DEPOSIT **$150.00** REFUNDABLE ONLY WHEN BOTH KEY'S HAVE BEEN RETURNED AND IT IS VERIFIED THAT THE CONTROL BOX IS STILL OPERATIONAL AND THE FINAL BILL HAS BEEN PAID.
X_____

WATER USED **$1.07 PER 100 GALLONS**

I hereby request a key for the water station and agree to pay all charges accrued against this application. I understand that invoices for the water used are due upon receipt; all invoices become delinquent 15 days from the invoice date and are subject to a 10 percent late fee. If at any time an invoice becomes 30 days past due, your access to the water station will be revoked. If your access is revoked you will not be entitled to any return of your deposit, all charges will need to be paid in full, a new application will have to be completed along with a new $150.00 deposit to be paid before being permitted access.

_____ _____
Applicant Signature District Representative

KEY # DATE OF SERVICE
TERMINATION _____
BEGINNING READING _____ ENDING READING _____