



NEW RESIDENTIAL ACCOUNT APPLICATION

(effective November 1, 2023)

Along with application you will need:

- Proof of Ownership or Lease Agreement
- Photo Identification
- Deposit of \$200.00 per Unit

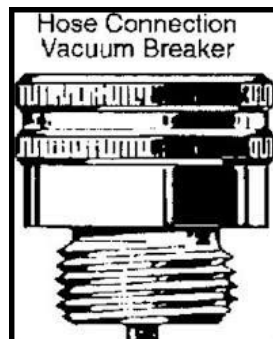
WATER SUPPLY PROTECTION PROGRAM

In compliance with the Rules and Regulations of the State of Texas, Galveston County WCID No. 1 has adopted a mandatory cross connection control and prevention ordinance which includes hose bibb vacuum breakers on every external faucet. **Water service will not be connected unless hose bibb vacuum breakers are installed on every external faucet.**

What is a hose bibb vacuum breaker?

This device is an atmospheric vacuum breaker for attachment to a hose bibb or faucet. This one-way valve allows water to flow from the tap, but not back in. It prevents back siphonage through ordinary garden hoses, thus protecting the water you drink from contamination.

You may purchase hose bibb vacuum breakers from your local hardware store or directly from the Water District located at 2750 FM 517 Road East in Dickinson for \$7.00 per each hose bibb vacuum breaker. These are NON-REFUNDABLE.



NEW RESIDENTIAL ACCOUNT APPLICATION FOR GALVESTON COUNTY WCID NO. 1

2750 FM 517 Road East
P. O. Box 307
Dickinson, TX 77539
Phone: (281) 337-1576

Account No.: _____
Amount of Deposit:/Receipt: _____ / _____
Date of Meter Turn On: _____

ALL BLANKS MUST BE COMPLETED BEFORE APPLICATION WILL BE ACCEPTED.

APPLICANT INFORMATION:

Date Requested: _____

Full Name of Applicant: _____ TX ID or TDL: _____

Service Address: _____ City & Zip Code: _____

Billing Address if Different: _____ City & Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Customer Email Address: _____

If a second adult will reside in same household, and WILL BE RESPONSIBLE FOR ACCOUNT, please fill in the following information: Please note, this person must supply a copy of ID and will be granted all rights and responsibilities of primary applicant.

CO-APPLICANT INFORMATION:

Full Name of Spouse or Responsible Adult: _____ TX ID or TDL: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Co-Applicant Email Address: _____

PROPERTY INFORMATION:

Do you own this property? _____ Are you the Home Builder, Landlord or the Resident? _____

If Renting or Leasing, Landlord's Name: _____ Daytime Phone: _____

Have you ever had water service in Dickinson before? _____ If YES, at what address and name was the service listed?

PAPERLESS BILLING:

The Water District will provide paperless billing to all customers unless the customer specifically requests for a hard copy utility bill to be mailed through the U.S. Postal Service. Please note that the Water District is not responsible for U.S. Postal Service delays.

YES, I request to receive a hard copy utility bill in lieu of paperless billing: _____
(Signature)

AUTOMATIC BILL PAYMENT THROUGH BANK DRAFTING OPTION:

Automatic bill payment service is available through bank drafting from a checking account by completing the attached form.

GARBAGE:

Customers within the Water District or within the City limits of Dickinson will be provided garbage service by AmeriWaste at a rate set out in the Water District’s Rate Ordinance. To establish recycling service, please contact AmeriWaste at 281-585-3200. You will be billed for recycling service directly through AmeriWaste.

SENIOR CITIZEN LATE FEE WAIVER:

If the person applying for service for their primary residence is age 60 or over, they are given 25 days to pay their water bill without late fee penalties.

YES, I am 60+ years old and request late fee penalties waived: _____
(Signature)

MANDATORY CONFIDENTIALITY:

All customer personal information, such as address and phone number, are kept confidential to the individuals listed on the account.

APPLICATION AGREEMENT:

I have read and understand the terms, conditions, and restrictions of this service agreement. I further acknowledge failure to abide by said restrictions shall, at a minimum, lead to discontinuance of service. I further understand that completion of this application, accompanied by receipt of deposit, will ensure NEXT BUSINESS DAY turn on services of water UNLESS the following day falls on a District cut-off day. In this situation, water service will be turned on the following business day.

I hereby apply for water and/or sewer service at the above address to be furnished at the standard rates and under terms and conditions of said District as from time to time established for such class of service. The deposit will be held until Applicant discontinues service to guarantee the payment of bill of whatever nature that may be due. When services have been discontinued, the deposit will be applied to the final bill. If any deposit, greater than \$2.00 is left, it will be refunded. I understand that failure to render payment within time prescribed on the bill will mean discontinuance of service. Further, if the District incurs additional expenses for past due collections, I agree to pay all costs of collections.

APPLICANT’S SIGNATURE

DATE OF APPLICATION

CO-APPLICANT’S SIGNATURE

DATE OF APPLICATION

(I have read the conditions of the attached application agreement.)

SERVICE APPLICATION AGREEMENT

- I. TERMS:** The following are the terms of the agreement between the Galveston County WCID No. 1 (“the Water District”) and named Applicant (“the Customer”), shown on the new residential account application:
- A.** The Water District will maintain a copy of this agreement as long as the Customer and/or the premises are connected to the water and/or sewer system.
 - B.** The Customer shall allow his property to be inspected for possible cross-connections. These inspections shall be conducted by the Water District or its designated agent prior to initiating service and periodically thereafter.
 - C.** The Customer shall immediately correct any noted violations on his/her premises before service is turned on.
- II. PURPOSE:** The Galveston County WCID No. 1, located at 2750 FM 517 Road East, Dickinson, Texas, is responsible for protecting the drinking water supply from contamination or pollution which could result from improper plumbing practices. The purpose of this agreement is to notify each customer of the plumbing restrictions which are in place to provide this protection. The utility enforces these restrictions to ensure the public health and welfare. Each customer must sign this agreement before the Galveston County WCID No. 1 will begin service. In addition, when service to an existing connection has been suspended or terminated, the Water District will not re-establish service unless it has a signed copy of this agreement.
- III. PLUMBING RESTRICTIONS:** The following undesirable plumbing practices are prohibited by State regulations:
- A.** No direct connection between the public drinking water supply and a potential source of contamination is permitted. Potential sources of contamination shall be isolated from the public water system by an air-gap or an appropriate back-flow prevention device.
 - B.** No cross-connection between the public drinking water supply and a private water system is permitted. These potential threats to the public drinking water supply shall be eliminated at the service connection by the installation of an air-gap or reduced pressure-zone back-flow prevention device.
 - C.** No connection which allows water to be returned to the public drinking water supply is permitted.
 - D.** No pipe or pipe fitting which contains more than 8.0% lead may be used for the installation or repair of plumbing at any connection which provides water for human use.
 - E.** No solder or flux which contains more than 0.2% lead can be used for the installation or repair of plumbing at any connection which provides water for human use.
 - F.** The Water District has adopted the SBCCI Plumbing & Gas Code with local restrictions. Customers shall consult with a licensed plumber or the City of Dickinson plumbing inspector prior to beginning any plumbing work.
- IV. ENFORCEMENT:** If the Customer fails to comply with the terms of the agreement, the Water District shall, at its option, terminate service or the Customer will properly install, test, and maintain an appropriate back-flow prevention device at the service connection. Any expenses associated with the enforcement of this agreement shall be billed to the Customer.
- V. FIRE PROTECTION SERVICES:** Your monthly water bill total will include a mandatory \$5.00 per unit fee for the Dickinson Volunteer Fire Department.
- VI. GARBAGE:** Customers within the Water District or within the City limits of Dickinson will be provided garbage service by AmeriWaste at rate set out in the Water District’s Rate Ordinance. The District does collect applicable sales tax on garbage service only. To establish recycling service, please contact AmeriWaste at 281-585-3200.

Bank Draft Authorization for Water Bill

I (we) hereby authorize Galveston County WCID #1, hereinafter called THE WATER DISTRICT, to initiate debit entries to my (our) checking account. Indicate below the depository name, routing number, and account number to debit. Return Bank drafts are subject to service fees, according to the Water District's Ordinance.

This authority is to remain in full effect until THE WATER DISTRICT has received written notification from me (us) of its termination in such time and in such manner as to afford THE WATER DISTRICT a reasonable opportunity to act on said notification.

BANK NAME _____ CITY _____ STATE _____

BANK ACCOUNT NAME(S) _____

ROUTING NUMBER _____ ACCOUNT NUMBER _____

WATER ACCOUNT NAME(S) _____

SERVICE ADDRESS _____

WATER ACCOUNT # _____

TELEPHONE NUMBER _____

SIGNATURE _____ DATE _____

IMPORTANT: Please continue to pay bill until you receive a bill that is marked ****BANK DRAFT DATE**** on billing statement below Net Amount Due. When process is in effect, your bill amount will be drafted from your checking account on the billing due date.

Note: *Any changes to bank draft information need to be made at least 7 days prior to the due date of the current bill.*

Note: There will be a \$30.00 fee assessed for any draft declined by your bank.

*****PLEASE ATTACH A VOIDED CHECK FROM YOUR CHECKING ACCOUNT*****