



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: _____
 Email: _____
 Description: _____
 Completion date _____

Water Station is Located at 2625 N Moapa Valley Blvd.

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

X _____

WATER USED **\$3.97 PER 100 GALLONS**

A NEW APPLICATION WILL NEED TO BE COMPLETED EVERY SIX MONTHS

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