

CITY OF KYLE-UTILITY BILLING DEPT.
100 W. CENTER STREET / P.O. BOX 40
KYLE, TX 78640
PHONE: (512) 262-3960
FAX: (512) 262-3965



FIRE HYDRANT APPLICATION

Company Name:

Service Address

Business Phone Number

Tax Identification Number

Email Address

Contact Person

Phone Number

Mailing Address (if different from above)

City, State, Zip

By signing, I understand that all fees must be paid in full before the water meter will be set. Furthermore, I understand that a minimum monthly charge of \$145.34 will be charged to the account every month in addition to charges for water consumed while the account is active. A service charge of \$38.06 may be imposed for any returned checks. All bills must be paid on or before the due date (15th of each month) or be subject to a late charge of 10%. If not paid before the 25th of each month, I understand that my utility service may be terminated.

Applicant's Signature

Date

FOR OFFICE USE ONLY:

EMPLOYEE INITS: _____ ACCOUNT# 099-_____

METER SIZE 2 1/2 " **DEPOSIT: \$1449.00 SERVICE CHARGE: \$63.39**

Receipt # _____

Method of Payment: Cash _____ Check# _____ CC Auth # _____

Serial Number: _____ Reading: _____