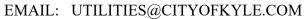
CITY OF KYLE-UTILITY BILLING DEPT.

100 W. CENTER STREET

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 differen	nt from above)	City, State, Zip
understand that a minimum month charges for water consumed while returned checks. All bills must be p	lly charge of \$193.67 will be of the account is active. A ser- paid on or before the due da	re the water meter will be set. Furthermore, I charged to the account every month in addition to vice charge of \$38.06 may be imposed for any ate (15th of each month) or be subject to a late lerstand that my utility service may be terminated.
Applicant's Signature		Date
	PAYMENT METH	OD
Credit Card #	- Cash or person	Check only accepted in
Expiration Date:	r	
FOR OFFICE USE ONLY	<u>.</u> ? :	
EMPLOYEE INITS:	ACCOUNT# 099-	
METER SIZE 2 ½ "	· · · · · · · · · · · · · · · · · · ·	449.00 SERVICE CHARGE: <u>\$63.39</u>
Receipt #		
Method of Payment: Cash_	Check#	CC Auth #
Carial Number	Reading	;;