Form 2



PO Box 7584, Cloisters Square, WA 6850

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Residential Account Establishment Form

Owner's Details

First Name	Middle Name	Last Name
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First Name	Middle Name	Last Name
Home Contact No.	Mobile No.	Email
Preferred Method to receive Client's (Please tick one box)	s Water Services Information Pack:	Email Post
Property Details I hereby apply to register the requirement for water service to be supplied to:		
Lot No		
Street Address		
Post Code		
Settlement Date/Move In Date / / * Attachment - Please attach a copy of Certificate of Title as proof of ownership.		
Applicants signature/s:		Date:
 With respect to the pre application, I accept the following conditions: 1. I authorise Country Heights Water Pty Ltd to enter my details as disclosed in this form in the company's database. 		
2. I agree to provide further details to Country Heights Water Pty Ltd to enable the company to register my property in the Country Heights Estate for the supply of water.		
3. On successful registration, Country Heights Water Pty Ltd will send a Client Information Pack electronically or by email (if preferred) containing the water services information and the procudure to follow to secure the water meter.		
4. I understand that this application form is to register my property in Country Heights Water Pty Ltd database only and not the application for a water meter.		
For Office Use Only		
Customer Ref No:	Date Processed:	Email Confirmation Yes / No