

RURAL WATER, SEWER, AND SOLID WASTE MANAGEMENT

**DISTRICT NO. 20**

PITTSBURG COUNTY, OKLAHOMA

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**APPLICATION FOR BENEFIT UNIT**

This Application for Utility Service is hereby made for the following parcel located within the Rural Water, Sewer, and Solid Waste Management District No. 20, Pittsburg County, Oklahoma (the “District”) and herein referred to as the “Premises”.

Type of Application (check one):

- New Service – purchasing a Benefit Unit before water service is connected.
- Transfer – purchased a Benefit Unit in the purchase price of our home with water service already connected.

Service Information:

Type of Property:    \_\_\_ Residential    \_\_\_ Commercial    \_\_\_ Community / Civic

Service Address: \_\_\_\_\_

Lot Number: \_\_\_\_\_ Block Number: \_\_\_\_\_ Plat Phase: \_\_\_\_\_

Desired Service Start Date (if not already connected): \_\_\_\_\_

Would you like to purchase a separate irrigation meter?    \_\_\_ Yes    \_\_\_ No

How many trash containers are you requesting?    \_\_\_ 1    \_\_\_ 2    \_\_\_ 3

Applicant Information:

Applicant: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Information:

Name of Emergency Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

By execution of this Application for Benefit Unit, the Applicant acknowledges receipt of the District’s By-Laws and the Rules and Regulations and agrees to comply with these documents in their current form and

as they may be amended from time to time by the District's Board of Directors. The undersigned being the owner or occupier of land located within the District, hereby makes application to said District for utility service and agrees to the following conditions:

1. To purchase at least one Benefit Unit for such service at the unit price identified in the most current rate sheet, OR attests that it has purchased a Benefit Unit when it purchased or built a home within the District.
2. Make a deposit of \$250.00 which shall be held by the District and applied to the final billing.
3. Provide a copy of the deed related to the Premises which identifies the Applicant as the owner of record for the Premises.
4. Remit the necessary payment in accordance with the District's Rules and Regulations.
5. Make no physical connection between any public or private water system and the water system of the District.
6. Provide the District with a perpetual easement for the lines crossing the Premises which grants the District the right to locate a water meter, a service pipe to the meter and a main line on the Premises at a point chosen by the District. The District shall have access to its property and equipment located upon the Premises at all reasonable times for any purpose connected with or in the furtherance of its business operations. The District, upon discontinuance of service, shall have the right to remove any of its property from the Premises.
7. The District shall tap line, install setting and meter.

I agree to remit payment for water service upon receipt of each monthly statement. I understand I am responsible for the water payment whether I receive a monthly statement or not. I understand failure to remit payment will risk the discontinuation of water service.

This agreement is subject to the approval by the Board of Directors of the District. Transfer of this Benefit Unit is subject to the Board's approval and a Transfer Fee. New Member shall provide a copy of Deed of Record. Please enclose with this application.

THE APPLICANT:

Signed: \_\_\_\_\_ Printed: \_\_\_\_\_ Date: \_\_\_\_\_

THE DISTRICT:

- Checking this box acknowledges the District's receipt of a copy of Applicant's Driver's License.
- Checking this box acknowledges the District's receipt of a copy of the Deed for the Property.

Signed: \_\_\_\_\_ Printed: \_\_\_\_\_ Date: \_\_\_\_\_

Return To:

Rural Water District No. 20, Pittsburg County  
 44 Water Street | Carlton Landing, Oklahoma 74432 Phone: (918) 707-5515  
 Email: findir@townofcarltonlanding.org

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Meeting date approved: \_\_\_\_\_

Chairman: \_\_\_\_\_ Vice-Chairman/Secretary: \_\_\_\_\_

