Eastern Pines Water Corporation

New Customer Application

customersupport@epwc.org

Please complete application in full. (Please Print)

All information is required for service to be activated or additional deposit is required.

Name:		
Property Address:		
City:	N.C.	Zip Code:
Billing Address:		
City:	State:	Zip Code:
Phone: (H)	(C)	(W)
Date of Birth://		SSN:
Effective Date:	red or read in your name)	Tax ID:
Signature:		Date:
Print:		Bank Draft: Yes / No (Additional form must be completed for draft)
Mail Completed Application to: Attn: New Service Eastern Pines Water Corporation 5442 Eastern Pines Road Greenville, N.C. 27858	3/4" 1" 2" or la	arger - Request Quote
New	construction - please	e provide:
Subdivision:		Lot Number:
Contractor:		
///////////////////////////////////////	//////////////////////////////////////	//////////////////////////////////////
Account Number:	Work Order Number:	Completed By:

"EPWC is an equal opportunity provider and employer."