

WATER PERMITS

ST. JOHN THE BAPTIST PARISH

1811 W. AIRLINE HIGHWAY, LAPLACE, LA 70068

MONDAY – FRIDAY 08:00AM-03:00PM

(985) 652-3131

THE FOLLOWING IS REQUIRED IF YOU ARE BUYING A HOUSE OR TRAILER:

- 1. PROOF OF OWNERSHIP BY PROVIDING A SIGNED AND DATED COPY OF YOUR PURCHASE AGREEMENT, SETTLEMENT STATEMENT OR CASH SALE**
- 2. A CURRENT PICTURE ID, SUCH AS YOUR DRIVER'S LICENSE, AND YOUR SOCIAL SECURITY CARD OR EIN NUMBER IS REQUIRED**
- 3. FEES INCLUDE A \$50 WATER DEPOSIT AND A \$10 TECHNOLOGY FEE**
- 4. FORMS OF PAYMENTS ACCEPTED ARE CASH, CHECK, OR MONEY ORDER**
- 5. TRAILERS REQUIRE A TITLE OR BILL OF SALE AS PROOF OF OWNERSHIP AND THE FEE IS \$100.00 WITH A \$10.00 TECHNOLOGY FEE**

THE FOLLOWING IS REQUIRED IF YOU ARE RENTING A HOUSE, APARTMENT OR TRAILER:

- 1. A SIGNED, NON ALTERED AND DATED COPY OF THE RENTAL AGREEMENT & IT CANNOT BE MORE THAN 30 DAYS FROM THE EFFECTIVE DATE OF THE LEASE. THE LEASE MUST BE CLEARLY LEGIBLE. ONCE THE LEASE IS PRESENTED, THE NAMES CANNOT BE CHANGED DUE TO AN OUTSTANDING WATER BILL.**
- 2. A CURRENT PICTURE ID, SUCH AS YOUR DRIVER'S LICENSE, AND YOUR SOCIAL SECURITY CARD OR EIN NUMBER IS REQUIRED**
- 3. TRAILER LEASES REQUIRE A TRAILER TITLE OF OWNERSHIP AND ALSO PROOF OF LAND OWNERSHIP**
 - A. IF YOU ARE RESPONSIBLE FOR THE WATER PAYMENT, YOU WILL BE REQUIRED TO PAY A \$100 WATER DEPOSIT & A \$10 TECHNOLOGY FEE**
- 4. FORMS OF PAYMENT ACCEPTED ARE CASH, CHECK, OR MONEY ORDER**

COMMERCIAL PERMITS DEPOSIT:

PLEASE INQUIRE WITH A UTILITY CLERK REGARDING OUR PROCESS AS FEES ARE DETERMINED BY METER SIZES

*****NOTE: ALL WATER ACCOUNTS MUST BE CURRENT OR PAID IN FULL BEFORE A NEW WATER PERMIT CAN BE ISSUED*******

St. John the Baptist Parish Utilities Water Service Application

Date _____ Building Location _____

Applicant's Name _____

Mailing Address _____ Subdivision _____

Lot # _____ Square _____

Telephone # _____

Social Security # _____

Date Deposit Paid _____ Deposit Paid _____

Technology Fee _____

Building Classification

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Residential | <input type="checkbox"/> New Structure |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Addition |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Trailer |

Parish Representative Signature _____

Parish Representative Signature _____

"The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This will not be used in evaluation of your application, or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race national origin of person/applicant on the basis of visual observation or surname."

Hispanic or Latino	Male	American Indian or Alaskan Native	Black or African American	White
Not Hispanic or Latino	Female	Asian	Native Hawaiian or other Pacific Islander	

**CREDIT APPLICATION TO
ST. JOHN PARISH UTILITIES
WATER SERVICE
(FULL NAME REQUIRED)**

FOR OFFICE USE ONLY

DEPOSIT DATA	
NO.	_____
DATE	_____
AMOUNT	_____

NAME (PLEASE PRINT) _____
FIRST MIDDLE LAST

WIFE'S OR HUSBANDS NAME _____
FIRST MIDDLE LAST

SERVICE ADDRESS _____
NUMBER STREET APARTMENT NUMBER CITY STATE ZIP

DATE OF APPLICATION _____ PHONE NUMBER _____

MAILING ADDRESS IF DIFFERENT FROM SERVICE ADDRESS - -

NUMBER STREET APARTMENT NUMBER CITY STATE ZIP

CREDIT INFORMATION

HIS EMPLOYER _____ ADDRESS _____ PHONE _____

HER EMPLOYER _____ ADDRESS _____ PHONE _____

RELATIVE'S NAME _____ ADDRESS _____ PHONE _____

YOUR PREVIOUS ADDRESS _____

DO YOU OWN YOUR HOME OR RENT? _____ RENTAL AGENT _____

APPLICANT'S SOCIAL SECURITY NO. _____ DRIVER'S LICENSE NO. _____

CREDIT REFERENCES - 1. _____ 2. _____
(BANK, HOMESTEAD, DEPARTMENT STORE, ETC.)

THE UNDERSIGNED HEREBY REQUESTS ST. JOHN PARISH UTILITIES (HEREINAFTER CALLED THE COMPANY) TO RENDER WATER SERVICE AT THE ABOVE SERVICE ADDRESS, AND AGREES TO RECEIVE FROM AND PAY COMPANY FOR ALL SUCH SERVICE REQUIRED ON THE PREMISES AT THE ABOVE ADDRESS AND AT SUBSEQUENT ADDRESSES DESIGNATED BY THE UNDERSIGNED TO WHICH UNDERSIGNED MAY REMOVE, IN ACCORDANCE WITH THE APPLICABLE RATES AND WITH THE SERVICE REGULATIONS OF THE COMPANY FOR SO LONG AS THE UNDERSIGNED OCCUPIES OR CONTROLS THE PREMISES AT THE ADDRESS OR ADDRESSES ABOVE MENTIONED AND REQUIRES THE SERVICE SPECIFIED HERIN.

THE UNDERSIGNED AGREES THAT THE COMPANY HAS NO OBLIGATION TO ACCEPT THIS REQUEST IF THE PREMISES AT THE ABOVE ADDRESS ARE NOT LOCATED ADJACENT TO SERVICE LINES OF THE COMPANY FROM WHICH THE REQUESTED SERVICE MAY BE READILY RENDERED, AND THAT COMPANY SHALL BE UNDER NO OBLIGATION TO SERVICE UNDERSIGNED AT ANY FUTURE ADDRESS TO WHICH UNDERSIGNED MAY MOVE IF SAID ADDRESS IS NOT SO LOCATED. UNDERSIGNED FURTHER AGREES THAT IF THE COMPANY RENDERS THE SERVICE HERIN REQUESTED THAT THIS REQUEST SHALL BECOME A CONTRACT BETWEEN THE UNDERSIGNED AND THE COMPANY.

 CUSTOMER'S SIGNATURE

FOR OFFICE USE ONLY

SPECIAL INSTRUCTIONS OR REMARKS

SERVICE DESIRED ON OR BEFORE _____

SERVICE COVERED BY SERVICE ORDER NO. _____

APPLICATION TAKEN BY _____