

For office use only

MIRE BRANCH WATER CORPORATION
1922 HIGGINBOTHAM HWY
CHURCH POINT, LA 70525

ACCOUNT # _____
LOCATION# _____
DESCRIPTION _____
3/4 INCH _____ 1 INCH _____

DOTTIE # _____
DATE CALLED _____
DATE READY _____
DATE INSTALL _____
LINE SIZE _____
LONG ____ SHORT ____

PAID AMOUNT: _____ CASH _____ CHECK _____ CC _____

MEMBERSHIP-NEW METER

DATE: _____

NAME: _____

MAILING ADDRESS: _____ CITY: _____ STATE _____ ZIP _____

PHONE: _____ DRIVER'S LICENSE: _____

Please enroll me in e-billing. My email address is: _____

LOCATION OF PROPERTY: _____

BE IT KNOWN AND REMEMBERED that we, the undersigned property owners, hereinafter referred to as "GRANTORS" , do hereby grant unto MIRE BRANCH WATER CORPORATION, a water system domiciled in Acadia Parish, Louisiana, hereinafter referred to as "GRANTEE", its successors and assigns, the right to lay, maintain, inspect, repair, alter, remove and relay a pipeline for the transportation of water and such valves, fittings, meters, and other equipment and appurtenances as may be necessary or convenient for such operations, over, through, upon, across, and under the property of the undersigned parallel and adjacent to the right of way of the above described property in Acadia Parish, Louisiana together with all rights of ingress and egress to and from said lines, for the purpose and benefit aforesaid, and the width of said easement shall not be more than fifteen feet from the side of the road right of way.

This servitude is made and accepted for and in consideration of the value of the availability of a water supply to Grantors' property together with other good and valuable consideration.

TO HAVE AND TO HOLD said easement, right and rights of way unto said Grantee, its successors and so long thereafter as the same shall be useful for the above named purposes.

I hereby apply for water service with Mire Branch Water Corporation. I agree to pay the cost of the meter installation and membership stated above. By applying for water service, I agree to the rules and policies set forth by the corporation.

APPLICANT/GRANTOR

DATE

CO-APPLICANT

DATE

This institution is an equal opportunity provider. This institution is handicap accessible.
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