CITY OF FULSHEAR

PO Box 279 / 30603 FM 1093
Fulshear, Texas 77441
Phone: 281.346.8860 ~ Fax: 281.346.8237
www.fulsheartexas.gov

APPLICATION FOR COMMERCIAL UTILITY SERVICES

Date of Application: _____

Water Meter Size: 5/8'' _____ 3/4'' _____ 1'' _____ Other_____
Irrigation Meter Size: 5/8'' _____ 3/4'' _____ 1'' _____ Other_____
Fire Meter Size: _____

Service Address: _____
Subdivision Name: _____
Lot: _____ Block: _____ Section: _____

Billing Information for Monthly Water Bill:

Customer Name: _____
Mailing Address: _____
City/State/Zip: _____
Phone Number: _____ Fax Number:_____
Email Address: _____

APPLICANT MUST TO ATTACH TWO (2) PLOT PLANS, SHOWING PROPOSED LOCATION OF THE TAPS REQUEST AND SIZES

ALL TAP REQUESTS OVER 1" WILL NEED TO BE SUBMITTED TO OBTAIN TAP FEES.

I HEREBY ACCEPT ALL THE ABOVE CONDTIONS AND CERTIFY THAT ALL STATEMENTS HEREIN RECORDED BY ME ARE TRUE.

_____
Signature Print Name Phone # Date

Payment Date: _____ Payment Amount: _____ Transmittal Date: _____