

South Mills Water Association  
**SERVICE AGREEMENT**

This SERVICE AGREEMENT(the"Agreement") is made and entered into as of the date written below, by and between South Mills Water Association, Incorporated (the "Association"), a North Carolina non-profit corporation; and the Customer (as set forth below).

**THE ASSOCIATION DOES NOT ALLOW MULTIPLE PRIMARY STRUCTURES TO CONNECT TO THE SAME METER. THIS AGREEMENT MAY COVER MULTIPLE CONNECTIONS ,BUT CUSTOMER MUST PAY ALL CONNECTION AND OTHER SERVICE CHARGES FOR EACH ADDITIONAL METER THE ASSOCIATION DEEMS NECESSARY.**

Monthly bills can be paid Monday through Friday from 8:00 am to 5:00 pm Eastern Time at the Association's office, by depositing payment in the Association drop box, [www.smwa.biz](http://www.smwa.biz) or by mailing payment to:

SMWA\*\* P.O.BOX 279 \*\* South Mills, NC 27976

Bills are mailed to customer on the first (1<sup>st</sup>) day of each month. If you do not receive your bill, please call 252-771-5620 for assistance.

**Bills are due the fifteenth (15<sup>th</sup>) day of each calendar month.**

**If the 15<sup>th</sup> falls on a weekend late fee are incurred at 5:00 pm on the next business day.**

**If not paid in full by the fifteenth (15<sup>th</sup>) day by 5:00 pm the customer must pay a \$10.00 late charge.**

Account that are in arrears, are two billings and two penalties behind, are subject to disconnection. Shutoff notices are mailed the day after the due date each month. The balance must be paid in full, or your water will be disconnected. If your bill is not paid in full before 8:00am on disconnected day the following \$35.00 fee will apply to your account.

NEW SERVICE \$ \_\_\_\_\_

RENTAL DEPOSIT \$ \_\_\_\_\_

TRANSFER FEE \$ \_\_\_\_\_

**YOU MUST INSTALL A CUT-OFF VALVE IN YOUR SERVICE LINE BEFORE THE ASSOCIATION CONNECTS YOU TO THE SYSTEM.**

**BY SIGNING THIS SERVICE AGREEMENT, CUSTOMER ACKNOWLEDGES AND AGREES TO BE BOUND BY THE ASSOCIATION 'S BYLAWS, THE SERVICE TERMS AND CONDITIONS SET FORTH IN EXHIBIT A, AND ANY POLICIES AND PROCEDURES THE ASSOCIATION MAY FROM TIME TO TIME ADOPT.**

Customer Name: \_\_\_\_\_ S.S# \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Phone# \_\_\_\_\_

Co-Applicant Name: \_\_\_\_\_ S.S.# \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Phone# \_\_\_\_\_

Service Location: \_\_\_\_\_

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

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

Account # \_\_\_\_\_ Receipt \_\_\_\_\_ Date \_\_\_\_\_

You may experience low pressure or no water for short interval during the following months due to flushing of the lines.

April and October  
Monday through Friday---- 8:00 am to 5:00 pm