TONTO BASIN WATER CO., INC.
ALTERNATE RATES FOR WATER PROGRAM
DECLARATION OF ELIGIBILITY

Your Name _____
As it appears on your water bill or as appearing on valid identification

Customer Account No. _____

Service Address_____

Mailing Address_____
If different from above address

Daytime Telephone Number_____
Please include Area Code

I, _____,
Your Name (p*lease print*)

last submitted an ARW program Application on _____
(dd/mm/yyyy)

and hereby confirm my eligibility for the year ending _____.
(dd/mm/yyyy)

_____ _____
Customer Signature Date

INSTRUCTIONS: An Application for Tonto Basin's Alternate Rates for Water Program must be submitted every two (2) years. A Declaration of Eligibility must be submitted annually.

Submit completed declaration to:

Tonto Basin Water Co., Inc.
PO Box 2389
Prescott, AZ 86302
info@jwwater.net

TONTO BASIN WATER CO, INC. USE ONLY

Date received _____ Date Verified _____ Verified By _____