



\*\*\*\*\*Commercial Utility Service Application\*\*\*\*\*

Water / Trash / Sewer Services

Federal Tax ID # ID required

**\*DEPOSIT IS REQUIRED\***

Service Address: \_\_\_\_\_

Service Start Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

Tax ID (EIN)#: \_\_\_\_\_

Location Phone Number: \_\_\_\_\_

Location Contact Name: \_\_\_\_\_

Would you like the account to be kept confidential? Yes No

Would you like your bill emailed to you? Yes No

**\*\*If you select Yes, a bill will NOT be delivered by U.S. Mail\*\***

Would you like to sign up for Bank Draft? Yes No

Hours: Monday – Friday 8am – 5pm

Phone: 254.772.4480

**Please email this form to:**

Customerservice@woodwaytexas.gov