



UTILITY BILLING ACCOUNT SET-UP

Water-Sewer-Trash Services

Town of Westlake * 1500 Solana Blvd, Bldg 7, Ste 7200 * Westlake, TX 76262

Tel: (817) 430-0941 * Fax: (817) 430-1812

e-mail: customerservice@westlake-tx.org

~ CUSTOMER SERVICE INFORMATION ~

Service Address: _____ Subdivision: _____ Requested Start Date: _____ [] Enrolling child(ren) into Westlake Academy? # of child(ren) _____	<input type="checkbox"/> Builder <input type="checkbox"/> Owner <input type="checkbox"/> Renting* *Attach copy of lease agreement and provide Landlord's information below. Name: _____ Phone Number: _____
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Applicant Name: _____			
Billing Address: _____			
City: _____	State: _____	Zip: _____	
Home Phone #: _____	Cell #: _____	Work #: _____	
Driver's License #: _____	State: _____	Expires: _____	
Email Address: _____			Please email my bills:

The Texas Open Records Act requires that the Town of Westlake make available your meter and account information unless you sign below indicating you do not want your information revealed. The Town does not make its customer database available except in circumstances where the law requires. If you would like your personal information (address, telephone number, social security) and the volumes or units of utility usage or amounts billed to be considered confidential please sign and return this form to the Town of Westlake. Please indicate if your account information is **confidential** or **public**. [] confidential
[] public

[FIRE HYDRANT METERS](#) - customer is required to email the meter reading by the [26th of each month to jgreenwood@westlake-tx.org](mailto:jgreenwood@westlake-tx.org) (or) [text a picture of the meter reading to \(817\) 680-1422](tel:8176801422). *Please list address or account number when submitting the meter reading.*

Applicant Signature: _____ Today's Date: _____

~ OFFICE USE ONLY ~

	#1 MAIN METER	#2 IRRIGATION	FIRELINE (or) FIRE HYDRANT
Account #:			
Customer # Assigned:			
Class Code:	[] B [] C [] R [] WA	[] IR	[] FL [] FH
Service Type:	[] Water [] Sewer [] Trash	[] Water only	[] Water only
Meter Number/Size/Read:			
Water Deposit:			
Sewer Deposit:			
FW Impact Fee:			
Water Connection/Tap Fee:			
Sewer Connection/Tap Fee:			
Meter Fee:			
TOTAL FEES:			

TOTAL AMOUNT DUE:			
Date Paid: _____	Pymt Type: _____	Deposit Date: _____	Initial: _____