Application Information

Please return your completed application, trash bin fee, waiver and indemnity form (if applicable), service fee, and deposit (cash or check) to our office. Your application and deposit must be received in our office before services can be established.

Office hours: 8:00 a.m. – 5:00 p.m. Monday-Friday, excluding holidays

You may drop your completed application, waiver and indemnity form, and payment into the Water Bill Drop Box located in the Village Center parking lot, positioned on the SW corner of the dumpster garage or you may email your completed application, waiver and indemnity form, and credit card payment information to: utilityservices@dentoncountyfwsd.com.

Your service can be turned on without anyone being present, however, a waiver and indemnity form must be completed. It is the homeowner’s responsibility to ensure that all faucets, both inside and outside, have been shut off completely prior to requesting a service connection. Should a leak be detected at your meter, upon connection of your service, our crews may find it necessary to reschedule your connection.

Deposit for all residential addresses: $75.00
Service Fee for all new accounts: $25.00
Initial trash and recycle Bin: $75.00 See application for information regarding the purchase of additional bins.

Unless bin(s) are left by the previous occupant, the purchase of a Waste Management trash bin in Castle Hills is mandatory for each residence. Once purchased, these trash bins become the resident’s property. We encourage you to print your address on the inside of the bin lid with a permanent marker for easy identification. Your trash and recycle bins will be delivered, at the garage entrance of your home.

<table>
<thead>
<tr>
<th>Pick-up Type</th>
<th>Day of the week</th>
<th>Important Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trash pick-up</td>
<td>Monday and Thursday</td>
<td>*All trash must be contained within your purchased bin. Waste Management will not pick up plastic bags or empty personal bins.</td>
</tr>
<tr>
<td>*Recycling pick-up</td>
<td>Thursday</td>
<td>*Although recycling is a voluntary program, Denton County Fresh Water Supply District 1-A encourages it.</td>
</tr>
<tr>
<td>**Bulk pick-up</td>
<td>Thursday</td>
<td>** By pre-arrangement only. Please call Waste Management, at least 24 hours in advance, at 972-315-5400.</td>
</tr>
</tbody>
</table>

Monthly invoices are mailed by the 10th of each month; payment is due on or before the 25th of the month. Should the 25th of the month fall on a weekend or holiday, payment will be due the first business day following. A penalty of 10% is applied to unpaid accounts the first business day following the penalty date.

NOTE: IF YOU HAVE NOT RECEIVED YOUR INVOICE BY THE 13TH OF THE MONTH, PLEASE CONTACT THE DCFWSD OFFICE AT 972-899-4000.

Denton County Fresh Water Supply District 1-A offers the following payment methods:

- Drop Box in the Village Retail Center parking lot
- US Postal Service
- On-line at www.dentoncountyfwsd.com
- Bank auto draft
- Hand delivery to our office
- Credit card draft
- Other items you may need: Application for Water, Sewer, and Refuse Service
- Application for Automatic Bank Draft or Credit Card Draft
- Waiver and Indemnity form
- Confidentiality Request
- Waste and Recycling Services
- Emergency Alert Notification System Information Update Form

Should you have any questions, please call 972-899-4000 or email utilityservices@dentoncountyfwsd.com
Application for Water, Sewer, and Refuse Service

WE MUST RECEIVE A COPY OF YOUR DRIVER’S LICENSE or TEXAS PHOTO ID TO PROCESS THIS APPLICATION.

Today’s Date: ________________ Date to Begin Service: ________________ Account Number __________________

Address Where Service is Desired:

1. Name of Person(s) or Business Responsible for Receipt and Payment of Services:

*Please note that our staff will ONLY be able to speak to the person(s) listed below regarding the account.

<table>
<thead>
<tr>
<th>A</th>
<th>Primary or Business Name</th>
<th>DL No.</th>
<th>State</th>
<th>D.O.B.</th>
<th>S.S. No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Work Phone</td>
<td>Mobile Phone</td>
<td>Email Address</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B</th>
<th>Alternate or Business Contact Name</th>
<th>DL No.</th>
<th>State</th>
<th>D.O.B.</th>
<th>S.S. No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Work Phone</td>
<td>Mobile Phone</td>
<td>Email Address</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Home Phone (Castle Hills):

(If this number is not yet available, please call our office to update your file as soon as possible)

3. Your Name:

(If Different from Line 2A or 2B Above)

4. Upon Start of Service, You Will Receive One (1) Trash Bin and One (1) Recycle Bin for $75.00.

Need Additional Bins?  Trash Bin (Qty): _______ $75.00 Each  Recycle Bin (Qty): _______ $50.00 Each

5. Billing Address:

(If Different than Service Address)

<table>
<thead>
<tr>
<th>Street/P.O. Box</th>
<th>City/State/Zip</th>
</tr>
</thead>
</table>

6. Do You (Please Check One): [ ] Own  [ ] Rent (*If Renting, Please Complete Item 10 Below.)

*10. Landlord Name: __________________________ Telephone: __________________________

<table>
<thead>
<tr>
<th>Street/P.O. Box</th>
<th>Fax: __________________________</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City/State/Zip</th>
<th>Mobile: __________________________</th>
</tr>
</thead>
</table>

☐ I understand that I am applying for new water, sewer, and garbage service and that all services will be prorated for the month that I am beginning service.

☐ I understand that if a payment is made after the due date, a 10% penalty is added to the account. If service is disconnected for any reason, I understand that a service charge will be due prior to reconnection. I also understand that there is a $35.00 return check fee for all NSF checks and/or auto drafts as well as a $3.00 administrative fee for credit card payments processed by office personnel.

☐ I understand that by signing below, I am applying for a combined water, sewer, trash, and recycling service account, and not for individual service accounts. I also understand and agree to pay all fees for these services in accordance with the District adopted Rate Order, available online at http://www.dentoncountyfwsd.com.

☐ I acknowledge that in the event of the account becoming delinquent, the account may be contracted to a collection company and may also be reported to the credit agencies.

Authorized Signature __________________________ Printed Name __________________________

AFS2016
Waiver and Indemnity Form

I, ___________________________________________________, do hereby waive my right to be present during the time in which Denton County F.W.S.D. NO. 1-A shall commence water service connections for the address commonly known as _____________________________________________________. I hereby indemnify and hold harmless Denton County Fresh Water Supply District 1-A, its agents, and employees, from and against any and all claims, demands, damages, losses, and/or expenses; including, but not limited to, attorney’s fees, arising out of, or resulting from, any and all performance of water service connections, on or with respect to, the property referenced herein.

Signed this ______ day of ___________________________ 20 ______

______________________________
Signature

Please return the completed application and waiver to our office at:

Denton County F.W.S.D. 1-A
Utility Office
2540 King Arthur Blvd. #220
Lewisville, TX  75056

If time permits, the service application, waiver, and deposit may be mailed to the address listed above.

This waiver is necessary for Denton County Fresh Water Supply District No. 1-A employees to activate water service to the subject property without anyone in the household being present. It is in your best interest to ensure that all faucets, both inside and outside, have been shut off completely. All information must be provided in order to connect water service.

IF THIS OFFICE DOES NOT RECEIVE ALL DOCUMENTATION,
WATER SERVICE CANNOT BE ACTIVATED AT THE REQUESTED ADDRESS.
Confidentiality Request

Denton County Fresh Water Supply District No. 1-A is a government operated utility; therefore, your water bill account information is considered public record under the Texas Public Information Act. However, a State law allows residential water customers to request that personal information and any information relating to water usage, billing amounts, and payment records be kept confidential. Personal information includes your address, telephone number(s), and social security number.

*Information cannot be kept confidential until this completed and signed form is received and processed by the Utility Billing Department.*

The request for confidentiality must be submitted in writing, using this form or by submitting a separate letter. Once the request is received and processed, the Utility Billing Department will not release confidential information for that customer except to:

1) Government officials/Law Enforcement;
2) Consumer reporting agencies;
3) Contractors or subcontractors who need the information to do their jobs;
4) Utility representatives; or
5) Individuals for whom the customer has waived confidentiality in writing. Persons in this category will be required to show identification before information will be released.

☐ I, the undersigned, have read and understand fully that by checking this box and signing this form that my personal, usage, billing, and/or payment information will not be released without my signed request as the primary account holder. I have read and understand the exceptions to this request regarding Law Enforcement, Local, State and/or Federal officials, consumer reporting agencies, etc. as listed above.

**Please Print**

Customer Name: _______________________________ Account Number: _______________________________

Service Address: ______________________________

City: Lewisville State: Texas Zip: 75056

Mailing Address: 
(if different than service address)

City: ______________________________ State: ______________ Zip: ______________

Home Phone: _______________________________ Cell Phone: _______________________________
# Automatic Bank Draft Authorization Agreement

- **Change in Existing Bank Draft**
- **New Bank Draft**

## Personal Information

- Utility Account Number: 
- Date: 
- Customer Name: 
- Customer Address: 
- City, State, Zip: 
- Home Phone: 
- Mobile Phone: 
- Email Address: 

## Bank Account Information

- Please sign me up for the Automatic **Bank Draft** payment option. I authorize Denton County Fresh Water Supply District No. 1-A to draft my bank account, indicated below, each month for payment of my utility services. I have enclosed a voided check.
- Financial Institution Name: 
- Address: 
- City, State, Zip: 
- Telephone Number: 
- Account Number: 
- ABA Routing Number: 

## Automatic Bank Draft (ABD) Terms and Conditions

**Automatic Bank Draft (ABD) Terms and Conditions:** You authorize Denton County Fresh Water Supply District No. 1-A to directly draft your payment from your bank account. Your account will be drafted each month, on the due date listed on your monthly invoice, until canceled, in writing.

**By signing this Authorization Agreement for Automatic Bank Draft you acknowledge and agree to the terms and conditions set forth therein.**

I hereby authorize the Denton County Fresh Water Supply District No. 1-A, hereinafter called the “District”, to charge the bank account indicated in this authorization form for my utility billing on the specified payment due date listed on my monthly invoice. I understand that if a monthly invoice is not received, it is my responsibility to contact the District to obtain the invoice amount. I understand that my request for the bank draft will take effect on my next billing cycle and I will receive an invoice stating “PAID BY DRAFT”. I am also authorizing my financial institution to pay said draft, when presented, until I have revoked the authorization, in writing.

I understand that this authorization will remain in effect until revoked by me, in writing. I understand that the District must receive my written cancellation notice no later than ten (10) days prior to the next billing due date for termination of the program. Should any change in my account information occur, I will notify the District, in writing, within 10 (ten) days of the date of change. The District reserves the right to cancel the bank draft program at any time.

I further agree that if any such bank draft transaction be denied or does not clear, whether with or without cause, the District shall be under no liability whatsoever, even if such denial results in the disconnection of my utility service. Further, I agree that the District shall be fully protected in drawing from any such accounts. I agree that any amount due the District, which is not paid in accordance with the terms of the Application for Service; utility service to my account will be subject to penalties and/or disconnection. Any item returned to the District as denied will be subject to a $35.00 return item fee.

I certify that I am an authorized signor of this account and that I will not dispute the payments with my bank, provided the transactions comply with the terms indicated in this authorization form.

Authorized Account/Card Holder Signature ___________________________ Date ___________
Emergency/Alert and Notification System

Information Update Form

Denton County Fresh Water Supply District 1-A will enter the information provided into the new Emergency/Alerts Notification System and will not distribute, sell, or otherwise disclose the information to anyone outside the District for any other use. The information will be used to send out alerts or notifications related to District operations and/or utility accounts. Please complete the information update form and return it to our office, as soon as possible, by one of the following methods:

- Scan and email the form back to us at customerservice@dentoncountyfwsd.com;
- Fax it back to 972-899-9336;
- Place it in our drop box in the parking lot of the Village Shops; or
- Mail it back to the address above.

Name: _____________________________________________________________
Address: __________________________________________________________
Utility Account No.: _________________________________________________

_____ Check here if you do not wish to receive notifications from the District.

Please note that the emergency notification system will attempt to contact at EVERY contact method you list below. By selecting more than one contact method, you understand that you will receive multiple notices.

Indicate your choice in the order of preferred contact methods below:

<table>
<thead>
<tr>
<th>Number/Email Address</th>
<th>Contact Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>□ Email □ SMS Text □ Work Phone □ Home Phone</td>
</tr>
<tr>
<td>2nd</td>
<td>□ Email □ SMS Text □ Work Phone □ Home Phone</td>
</tr>
<tr>
<td>3rd</td>
<td>□ Email □ SMS Text □ Work Phone □ Home Phone</td>
</tr>
<tr>
<td>4th</td>
<td>□ Email □ SMS Text □ Work Phone □ Home Phone</td>
</tr>
</tbody>
</table>

Utility Account Holder Signature ___________________________ Date _____________
Monthly Statement Via Email Request

PLEASE PRINT CLEARLY

Return to us at our address listed above or by email to customerservice@dentoncountyfwsd.com. Once the information is received we will complete the request and you will receive your next monthly water bill via email. Please be sure to add us to your contacts and/or safe sender list so that your monthly bill is not routed to your junk mail folder. Denton County Fresh Water Supply District 1-A will not be responsible for lost or misdirected email statements.

Name on Water Account: ____________________________

Water Account Number: ____________________________

Home Number: ___________ Cell Number: ___________ Work Number: ___________

Email Address: ____________________________

Water Service Address: ____________________________

City, State, Zip: ____________________________

Billing Address: ____________________________

City, State, Zip: ____________________________

(*If different than Water Service Address)

Any information contained in the monthly email statement is meant solely for the intended recipient. No liability or responsibility is accepted if information or data is, for whatever reason corrupted or does not reach its intended recipient. No warranty is given that this email is free of viruses.

Denton County Fresh Water Supply District 1-A is a government operated utility; therefore, your water bill account information is considered public record under the Texas Public Information Act. However, a state law allows residential water customers to request that personal information and any information relating to water usage, billing amounts, and payment records be kept confidential. Personal information includes your address, telephone number, social security number, and email address.

The Utility Billing Department will not release confidential information for this customer except to:

1) Government officials,
2) Consumer reporting agencies
3) Contractors or subcontractors who need the information to do their jobs,
4) Utility representatives, or
5) Individuals for whom the customer has waived confidentiality in writing. Persons in this category will be required to show identification before information will be released.

□ I, the undersigned, have read and understand fully that by checking this box and signing this form that my personal usage, billing, and or payment information will not be released without my signed request as the primary account holder. I have read and understand the exceptions to this request regarding state and federal officials, consumer reporting agencies, etc. as listed above.

_________________________  _______________
Signature                  Date
Residential Recycling Guide

ITEMS THAT CAN BE RECYCLED

✓ **Mixed Residential Paper**: Newspaper, inserts, magazines, paperboard boxes, mail, junk mail, office paper, paper bags, phone and paper books and cardboard (cardboard must be cut up into 6” x 6” squares).

✓ **Cans**: Food, beer, and soft drink cans composed of tin, steel or aluminum: other clean cans of same material.

✓ **Glass**: Food and beverage containers that are clear, brown, or green in color.

✓ **Plastic**: Any plastic container with the #1 through #7 recycling symbol on the bottom of the container, HDPE (milk and detergent bottles), PET (primarily soft drink containers), plastic bottles generally referred to as one and two liter soft drink, milk, juice, water, shampoo, and liquid soap containers.

ITEMS THAT CANNOT BE RECYCLED:

☒ Household trash  ☒ Styrofoam cups, plates, peanuts
☒ Aluminum foil  ☒ Plastic toys
☒ Auto/window glass  ☒ Waxed paper/food containers
☒ Ceramics, china/dishes  ☒ Yard Waste
☒ Drink boxes with straws  ☒ No containers that held hazardous materials such as bleach, chlorine, motor oil, paint, pesticide or weed killer.
☒ Hard cover books
☒ Light bulbs
☒ Paper milk and juice cartons
☒ Plastic grocery sacks

PROGRAM DETAILS

- Recyclables must be wheeled to your alley or curb for pickup prior to 7:00 a.m. on Fridays.
- Recyclables must fit inside the Recycling bin.
- All recyclables must be empty and rinsed. Lids & caps must be removed from the containers and discarded in the trash.
- If you need any additional information please contact Waste Management, Customer Service Center at 972-315-5400.