

Gafford Chapel Water Supply Corporation
P.O. Box 1160, Sulphur Springs, Texas 75483-1160
Customer Information

Account Number /s _____

The person's name on this account is the _____ **Owner** _____ **Renter**

Name /s on the Account _____

Bill Mailing Address _____

City _____ **State** _____ **Zip** _____

Address/Location of the Meter _____

City _____ **TX** _____

Home Phone number _____ **Cell Phone** _____

Email _____

If the person's name on the account is the renter please identify the owner:

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Ethnicity/Race: _____ **Hispanic/Latino** _____ **American Indian/Alaska Native**

_____ **Asian** _____ **Black/African American** _____ **White** _____ **Hawaiian**

Gender: _____ **Male** _____ **Female**

Office Use:

_____ **Service Agreement on File** _____ **Policy Guidelines Provided**