



# City of Liberty Hill

## UTILITY BILLING

City of Liberty Hill  
926 Loop 332  
Liberty Hill, Texas 78642

Phone: 512-778-5449  
email: [UtilityBilling@LibertyHillTX.gov](mailto:UtilityBilling@LibertyHillTX.gov)

### WASTEWATER SERVICE APPLICATION

Applicant Name:	Co-Applicant Name:
Service Address:	Mailing Address (Street):
Driver's License No./State of issue:	City/State/Zip code:
Date of Birth:	Home Phone:
Cell Phone:	Email Address:
Date Service to be Activated:	<i>(Service connects only Monday – Friday 8 AM to 5 PM)</i>

#### CONFIDENTIALITY:

- I **DO** want personal information on my utility account (address, telephone number, and driver's license/social security number) to be **confidential**, unless specifically exempted by State statute.
- I **DO NOT** want personal information on my utility account to be confidential, thus causing this information to be subject to open records provisions.

#### WAIVER OF PENALTIES:

- I am disabled as verified by the attached Award Letter from the Social Security Administration.
- I am 60 years of age or older and request a waiver of late penalties over Texas House Bill #670, also called the "Elderly Act."

#### Fees and Deposits

- \$40.00 (out-of-city residents) OR \$30.00 (in-city residents) **Service Installation Fee** with all applications – may be paid in person with the application or added on the first bill.
- \$100.00 **Deposit** (refundable upon disconnection of service – minus any balance present)

#### General Information

- Meter/Service Tampering: Fines and fees are assessed by the City of Liberty Hill Municipal Code for anyone damaging, destroying, connecting, and/or permitting the flow of unmetered water and tampering in any way with City equipment.
- The City shall have the right of access to the resident's premises to set, read, remove, replace, or repair meters.
- Service Initiation requests received for Saturday, Sunday, or holidays will be initiated on the preceding business day.

I certify that I am 18 years of age or older, that the above information is accurate, and that I will be responsible for payment of the entire bill upon termination of service. Additionally, if the City determines that I owe any past due balances from previous utility accounts, I will be responsible for payment of those balances and any associated fees before this application will be processed.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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#### For Office Use Only:

Customer Account No.: \_\_\_\_\_