TO: Fern Bluff Municipal Utility District
7320 Wyoming Springs Dr.
Round Rock, TX 78681

ACCOUNT #_____
(Office will assign number)

PH: 512-238-0606
FAX: 512-238-7323

SERVICE APPLICATION & AGREEMENT

PURPOSE: **Fern Bluff MUD**

I. Is responsible for protecting the drinking water supply from contamination or pollution which could result from improper plumbing practices. The purpose of this Service Agreement is to notify each customer of the plumbing restrictions which are in place to provide this protection. The utility enforces these restrictions to ensure the public health and welfare. Each customer must sign this Service Agreement before we will begin service. In addition, when service to an existing connection has been suspended or terminated, the water system will not re-establish service unless it has a signed copy of this Service Agreement.

II. PLUMBING RESTRICTIONS: The following undesirable plumbing practices are prohibited by State regulations:

A. No direct-connection between the public drinking water supply and potential source of contamination is permitted. Potential sources of contamination shall be isolated from the public water system by an air-gap or an appropriate backflow prevention device.

B. No cross-connection between the public drinking water supply and a private water system is permitted. These potential threats to the public drinking water supply shall be eliminated at the service connection by installation of an air-gap or a reduced pressure-zone backflow prevention device.

C. No connection which allows water to be returned to the public drinking water supply is permitted.

D. No pipe or pipe fitting which contains more than 8.0% lead may be used for the installation or repair of plumbing at any connection which provides water for human use.

E. No solder or flux which contains more than 0.2% lead can be used for the installation or repair of plumbing at any connection which provides water for human use.

PLUMBING RESTRICTIONS: The following are the terms of the Service Agreement between:

Fern Bluff MUD

(the "Water Provider") and

III.

_____

(Customer Signature - Required)

A. The Water System will maintain a copy of this Service Agreement as long as the customer and/or premises is connected to the Water System.

B. The Customer shall allow his property to be inspected for possible cross-connections and other unacceptable plumbing practices. These inspections shall be conducted by the District or its designated agent prior to initiating new water service; when there is reason to believe that cross-connections or other unacceptable plumbing practices exist; or after any major changes to the private plumbing facilities. The inspections shall be conducted during the District's business hours.

C. The Water System shall notify the customer in writing of any cross-connection or other undesirable plumbing practice which has been identified during the initial inspection or the periodic re-inspection.

D. The Customer shall immediately correct any undesirable plumbing practice on his premises.

E. The Customer shall, at his expense, property install, test, and maintain any backflow prevention device required by the Water System. Copies of all testing and maintenance records shall be provided to the Water System.

IV. ENFORCEMENT: If the Customer fails to comply with the terms of the Service Agreement, the Water System shall, at its option, either terminate service or properly install, test, and maintain an appropriate backflow prevention device at the service connection. Any expenses associated with the enforcement of this Service Agreement shall be billed to the Customer.

Do you have any of the following: ___Irrigation System, ___Pool, ___Hot Tub, ___Water Softener, ___None

You must notify Fern Bluff MUD if any of the above are installed after move in. If any of the above are noticed at time of turn on, Severn Trent will not turn on services until all requirements are met.

Customer Information (please print):

*** Indicates Information is Required**

*****Last name:_____ *****First name:_____

*****Drivers License No _____ _____
(State) (DL #)

*****Service address:_____

Mailing address (if different):_____

*****City:_____ *****State_____ *****Zip Code:_____

*****Home/Cell Phone: (___)_____Work Phone: (___)_____

E-mail Address: _____

*****CUSTOMER SIGNATURE:_____

*****Date Service to Begin_____

Spouse or 2nd account holder's name_____

(If account holder defaults on payments/responsibility 2nd account holder will be held responsible)

*****Drivers License No _____ _____
(State) (DL #)

Renting / Leasing / Own Property (circle one) - If renting or leasing below information is required to process application

Owner:_____ Owner's Address_____

Owner Phone Number: _____

FOR OFFICE USE ONLY:_____

Account number: _____ Date Received: _____ Entered by: _____