

GREATER WARD ONE WATERWORKS DISTRICT INFORMATION SHEET

AN EQUAL OPPORTUNITY PROVIDER

Office Phone 24 Hrs. 318-255-7995
 Office Hours: Monday through Friday 8:30am to 5:00pm
 (Closed for Scheduled Holidays)

You are required to pay a deposit and complete an application.

If you do not know your 911 address, please call Lincoln Parish GIS at 318-251-8695 and ask for the 911 Service. They will add your information to the 911 system which is required for emergency services.

RATES AS OF 01/01/2022:

Code	Type	Usage Gal.	** Min Rate			Total Min Monthly
			FLAT	SWD FEE	TAX 2%	
WD	COM	0 - 5,000	45.00	1.00	.90	46.90
W1	COM	0 - 15,000	75.00	1.00	1.50	77.50
WB	COM	0 - 20,000	88.00	1.00	1.76	90.76
WA	COM	0 - 50,000	250.00	1.00	5.00	256.00
WG	COM + 1 RES	0 - 7,000	58.50	1.00	1.17	60.67
WR	RES	0 - 2,000	14.00	1.00	0	15.00
W3	RES	0 - 5,000	45.00	1.00	0	46.00
W2	RES (2 ON 1 METER)	0 - 2,000	28.00	1.00	0	29.00
WF	RES (3 ON 1 METER)	0 - 2,000	42.00	1.00	0	43.00
WH	RES (5 ON 1 METER)	0 - 2,000	70.00	1.00	0	71.00
V	VALVE		\$ 10.00			

**** Addl' rate calculated at .00300 per gallon over max used**

Meters are read the week of the 18th each month.

Bills are mailed around the 25th of the month

Payment is due in our office on or by the 10th of the month. Late charges apply after the 10th.

Full Payment must be in office by 20th of month to avoid disconnect. No further notice given.
\$25.00 Reconnect Fee

Payment Methods Accepted:

- Cash
- Check
- Money Order
- Self-Request Bill Pay at Your Bank
- Auto Bank Draft (no additional charge to you)
- Credit/Debit Cards (include 3.5% processing fee) either in person or by phone.

After Hours Payments: A Drop-Box is located in the drive thru on the east side of the office. Envelopes are provided for your convenience.

Please make sure to include your Bill Stub, and/or provide your Account Number with all payments to ensure payments are posted correctly.

METER LOCKS

It is a violation of Louisiana Law to cut meter locks or otherwise tamper with meters.

Like us on Facebook and check out and subscribe to our website at <https://gwowwd.myruralwater.com>.



GREATER WARD ONE WATERWORKS DISTRICT
CUSTOMER APPLICATION
THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER

Name: _____

Subdivision _____ Lot # _____

Physical Address _____ City _____ State _____ Zip _____

Mail Address _____ City _____ State _____ Zip _____

Place of Employment _____

Work Phone _____ Home # _____ Cell # _____

Spouse's Employment _____ Work Phone _____ Cell # _____

TYPE OF SERVICE

- _____ Home Owned by Customer
- _____ Speculation Home
- _____ Home Rental
- _____ Mobile Home Owner
- _____ Mobile Home Rental
- _____ Commercial Business - Estimated usage 0-5000 gallons per month
- _____ Commercial Business - Large estimated usage 0-50,000 gallons per month

EXISTING SERVICE? Yes ___ No ___ If not circle the size meter you will need
¾ Inch 1 Inch 2 Inch

Will this installation require a road bore? Yes ___ No ___

ALLOW 10 WORKING DAYS FOR ALL INSTALLATIONS

- | | | |
|-----|-----|--|
| Yes | No | |
| ___ | ___ | Customer understands Bills must be paid monthly |
| ___ | ___ | Customer understands Bill Payment Method |
| ___ | ___ | Customer understands Water Charges |
| ___ | ___ | Customer understands all water meter installations and road bores are done by Greater Ward One Waterworks District |

*****Scan, and email pages 3, 4, 5 and (6 if requesting bank draft) to gwowwd@att.net*****

Signed

Date



The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through USDA Rural Development that the Federal Laws prohibiting discrimination against customer applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will no be used in evaluating your application or to discriminated against you in any way. However, if you choose not to furnish it, we are required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.

APPLICANT <input type="checkbox"/> I do not wish to furnish this information.			CO-APPLICANT: <input type="checkbox"/> I do not wish to furnish this information.		
Race:		American Indian or Alaska Native	Race:		American Indian or Alaska Native
		Asian			Asian
		Black or African American			Black or African American
		Native Hawaiian or Pacific Islander			Native Hawaiian or Pacific Islander
		White			White
Ethnicity:		Hispanic or Latino	Ethnicity:		Hispanic or Latino
		Non-Hispanic Latino			Non-Hispanic Latino
Sex:		Male	Sex		Males
Sex:		Female	Sex		Female
Interviewer's Name (print)			Name and Address of Interviewer's Employer		
			Greater Ward One Waterworks P.O. Box 637 Ruston, LA 71273-0637		
Interviewer's Signature			Interviewee Signature Not Required		
Interviewer's Phone Number 318-255-7995					



GREATER WARD ONE WATER WORKS DISTRICT

Cross-Connection Control Policy Customer Service Agreement

PURPOSE: The Greater Ward One Water District is responsible for protection the drinking water supply from contamination or pollution which could result from improper system construction or configuration on the customer's side of the meter. The purpose of this service agreement is to notify each customer of the adopted Cross-Connection Control Policy that Greater Ward One Waters District enforces to provide this protection. A copy of this policy is available upon request. The public water system enforces these restrictions to protect the public health and welfare of its customers. Each customer must sign this agreement before Greater Ward One Water Works District will begin service. In addition, when service is 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 agreement.

RESTRICTIONS: The following unacceptable practices are prohibited by the Greater Ward One Water Works District's Cross-Connection Control Policy and the Louisiana Administrative Code, Title 51.

- No direct connection between the public drinking water supply and a 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 back-flow prevention device.
- No cross-connection between the public drinking water supply and a private water system is permitted.
- No connection which allows water to be returned to the public drinking water supply is permitted.

SERVICE AGREEMENT: The following are terms of the service agreement between the Greater Ward One Water Works District (the Water System) and _____ (the Customer).

- The Water System will maintain a copy of this agreement for as long as the Customer and/or the premises is connected to the Water System.
- The Customer shall allow his property to be inspected for possible cross-connections and other potential contamination hazards. These inspections shall be conducted by the Water System, or its designated agent prior to initiating new water service; when there is reason to believe that cross-connections or other potential contamination hazards exist; or after any major changes to the private water distribution facilities.
- The Water System shall notify the Customer in writing of any cross-connection or other potential contamination hazard which has been identified during the initial inspection or the periodic re-inspection.
- The Customer shall immediately remove or adequately isolate any potential cross-connections or other potential contamination hazards on their premises.
- The Customer shall, at their expense, properly 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.

ENFORCEMENT: If the Customer fails to comply with the terms of the Service Agreement, the Water System shall terminate service until the Customer can prove compliance with the Cross-Connection Control Policy.

I hereby certify that I have read and understand the terms of this Customer Service Agreement.

Customer Signature

Date

Service Address: _____



**GREATER WARD ONE WATER WORKS DISTRICT
P.O. Box 637
Ruston, LA 71273-0637
318-255-7995**

ACH BANK DRAFT AUTHORIZATION FORM

This form must be completed for automatic bank drafting by Greater Ward One Water Works District and can be changed or terminated by contacting the Greater Ward One Water Works District office.

I hereby authorize (**Bank Name**) _____) to honor a draft drawn on my account by Greater Ward One Water Works District. Monthly drafts will be drawn on the 10th of each month.

I understand that if funds are not available at the time of the withdrawal, there will be a \$25.00 fee, and subject to termination of this service for future use.

Customer Name: _____

Bank Name: _____

Bank Routing Number: _____

Bank Account Number: _____

Please provide copy of a check for verification purposes only.

Customer Signature: _____

Date: _____

OFFICE USE ONLY

BANK # _____

GWO ACCOUNT # _____

