



P.O. Box 1287  
Cabot, AR 72023  
501-605-1740

Standing Deposit  
Request for Service

Owner's Name \_\_\_\_\_

Previous Tenant \_\_\_\_\_

Address: \_\_\_\_\_

Date to Begin Service: \_\_\_\_\_

On date above take the following action (Circle One): Turn ON / Turn OFF / Unlock  
(Unlock means Cabot Waterworks will unlock the water meter but will not turn on the water.)

\_\_\_\_\_

Mailing Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #'s \_\_\_\_\_

Special Water Turn On Instructions:

\_\_\_\_\_  
\_\_\_\_\_

**Is it OK to turn water "on" if customer is not present? (Circle One) Yes / No**

**Cabot Waterworks will not be responsible for water damage to your property.**

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

