

MARILEE SPECIAL UTILITY DISTRICT
P.O. Box 1017
Celina, Texas 75009
972-382-3222

COST OF SERVICE NOTICE

(Commercial Service)

APPLICANT: _____ DATE: _____

PROPERTY: _____

The District has determined the cost for providing service to your property in the amount stated below. By signing this notice, you acknowledge that all charges and fees for service are non-refundable except for the Deposit. If you sell or vacate the property, you must request a final monthly bill and provide a forwarding address. The District will apply your Deposit to the final bill and refund the difference. This notice is provided in accordance with Section E.2(b)(5) of the District's Rate Order and shall remain in effect for thirty (30) days from the date above.

Check all that apply:

_____	Service Investigation Fee	_____
_____	Deposit	\$ _____
_____	Activation Fee	25.00
_____	Connection Fee	_____
_____	Reserved Service Charge	_____
_____	Easement Fee	_____
_____	Street Crossing: County Road	_____
_____	Street Crossing: State Highway	_____
_____	(Other) _____	_____
	TOTAL:	\$ _____

By executing this notice, the undersigned represents that he/she does so on behalf and with the authority of the above-named applicant.

Signature

Print Name

Title