



BULK WATER APPLICATION

"This institution is an equal opportunity provider."

TOWN OF LURAY

45 East Main Street * P.O. Box 629

Luray, VA 22835

(540)743-5511(phone) or (540)743-1486 (fax)

www.townofluray.com

Today's Date: _____

Business Name _____

Tax ID # _____

Owner Name _____

Social Security # _____

Have you ever received Utility Service from the Town of Luray ☐ YES ☐ NO

Billing Address (if different from above) _____

Office Phone _____ Cell Phone _____

Email Address _____

AUTHORIZATION

I understand that Utility Bills are due on the 10th of each month, bills not paid by the 10th of each month are subject to penalty. The undersigned will be responsible for payment for all charges until notification is given to discontinue service. I hereby declare all the above information to be true, full, and correct to the best of my knowledge.

Signature _____ Date _____

The Town of Luray has utilized funding from the USDA for the construction of Town facilities.

The United States Department of Agriculture states that no person shall be discriminated against on the basis of race, color, national origin, religion, sex, gender, disability, age, marital status, income derived from public assistance, political views, reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA. To ensure that its outreach through these programs and activities reach all members, the following data collection is required:

☐ I choose **not** to provide this information.

Ethnicity - Hispanic or Latino ☐ Non Hispanic or Latino ☐

Race - American Indian/ Alaskan Native ☐ Asian ☐ Black/African American ☐ White ☐

Native Hawaiian or Other Pacific Islander ☐ Other ☐

Gender- Male ☐ Female ☐ Other ☐

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****Bulk water is charged at the same rates as regular water services. Rates can be found on the Town's Fee & Rate Schedule at www.townofluray.com**