



Application for Bulk Water Filling Station Use

Today's Date _____

Company/Individual: _____

Full Name: _____

Last First

Billing Address: _____

Street City State ZIP

TIN: _____ Driver's License No. _____

Tax Exempt: Y or N ; if yes, please provide exemption or resale certificate

Contact Phone No: _____ Email: _____

Truck Information:

License Plate Number: _____

Access Code: _____ (assigned by KWD)

4 Digit Pin Number: _____ (assigned by KWD)

I have read and agree to the terms and conditions of bulk fill water purchases.

Signature: _____ Date: _____

Please send application to:

Billing@Kennebecwater.org

For Assistance call Kennebec Water District at (207) 872-2763