GUAM WATERWORKS AUTHORITY

Post Office Box 3010, Hagatna, Guam 96932
Phone: (671) 647-2603 Fax: (671) 649-0369
CUSTOMER SERVICE

CUSTOMER INFORMATION

Applicant's Name: _____ Applicant's SS/ID #:_____
First M.I. Last

Co-Applicant's Name: _____ Co-Applicant's SS/ID #: _____
First M.I. Last

Home Phone No: _____ Cell Phone No. _____Work Phone#._____

Mailing Address: _____

House #: _____ Street: _____ Village: _____

Please draw map to your premises

FOR OFFICIAL USE ONLY

Service Request Date _____ Work Order No._____

Account Number _____ Rec'd By _____

Ref Account No. _____ Type of Service _____

Documents Attached: [ ] Lease Agreement [ ] Authorization [ ] Photo ID [ ] Building Permit [ ] Deeds

[ ] Other _____