City of Lake Charles, Louisiana
Service Application

Date _____

Customer Name _____

Service Address _____

Are you the: _____OWNER _____RENTER _____TENANT _____OTHER specify: _____

Where would you like your bill mailed to?

Mailing Address _____

_____

_____

Have you had service with us before? If yes, where _____

Phone# ( ) _____ Type _____
area code H = home C = Cellular

SS# _____ DL# _____ STATE DL issued ___

EMPL _____ EMPL. PH# _____
Place of Employment

Type of Service Requesting:

_____WATER _____ NEW SERVICE _____ MOVING TO NEW ADDRESS

_____ SEWER _____ TAP _____ STOP SERVICE

_____ IRRIGATION _____ ADDITIONAL SERVICE _____ RESET METER

Service START Date: _____ Service TURN-OFF Date: _____

For Office Use Only:

CID# _____ LID# _____ Cycle Route _____

Meter Size _____ Permit # _____

Tap Size _____ Picture ID _____ Clerk _____

Signature _____

The City of Lake Charles fully complies with Title VI of the Civil Rights Act of 1964 and related statues and regulations in all programs and activities.
For more information, or to obtain a Title VI Complaint Form, See the City of Lake Charles' website –www.cityoflakecharles.com or call the Mayor's Action Line at (337)491-1346, or contact the Water Business Manager at (337) 491-1389, or call the Title VI Coordinator at (337) 491-1440.