City of Gainesville
Department of Water Resources
Account Security

Please complete the following information. You may return the form to us by faxing it to us at 770-538-2414 or mailing it to 757 Queen City Parkway SW, Gainesville, GA 30501.

Name: _____

Account #: _____

Mailing Address: _____

_____

Service Address: _____

_____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

E-Mail Address: _____

LAST 4 (FOUR) DIGITS OF SOCIAL SECURITY #: XXX-XX-_____

This will be your code to access your account information by phone.

Signature : _____

Date: _____

Date Scanned:_____

Internal Use Only

Date Received:_____

Staff Initials: _____