



OLOOLAISER WATER AND SEWERAGE COMPANY LIMITED

CUSTOMER WATER SUPPLY CONTRACT

CUSTOMER DETAILS

Full Name.....

Postal Code..... City/Town..... Address.....

Physical Address..... Occupation Place of work.....

Plot No.

Location: Estate

Road/Street..... Name of Employer (if self employed, Name of Business).....

Place of Work.....

Postal Address.....

Cell Phone..... Email

EMPLOYER'S CERTIFICATE

I certify that Mr./Mrs./Ms. is employed by.....

Signature.....

..... Official Rubber Stamp.....

Please make sure that 3 copies of each of the following items are submitted together with your application form:

..... 1. Personal Identification (Identify Card/Passport—Companies to attach copy of Certificate of Incorporation) 2. KRA PIN No

..... 3. Proof of property ownership (Land Titles/Sale Agreement/Allocation Letter)

LANDLORD GUARANTEE

(Where Tenant is applying)

Name of Landlord.....

Postal Address.....

Code..... City/Town.....

Tel/Fax/Email.....

I, The above named landlord hereby certify that the within named applicant is my tenant/sub-tenant with effect

from..... (Date) and guarantee that bills in respect of this connection shall be paid by me in the event the tenant fails to pay. I herewith undertake to notify Ololaiser Water and Sewerage Company on any change in tenancy one month in advance.

Signature of Landlord.....
 Date..... ID No. /Passport No.
 PIN No.

CUSTOMER'S OBLIGATION

I agree to abide by the terms and conditions specified in the Water Act 2016 and hold myself responsible for payment of water, sewer and meter rent until such time as the agreement is terminated in accordance with the Company's policy

Signature.....
Date.....

FOR OFFICIAL USE ONLY

Name of Water Supply..... Connection

Register Number..... Zone.....

Name of Previous Occupier.....

Current Amount Outstanding (Kshs.).....

Account Classification: Domestic/Commercial/Industrial/Institution/Kiosk, etc.....

Water Connection Survey Report.....

Survey by Date Signature.....

Sewer Connection Surveyed by..... Date Signature.....

Conservancy..... Date Signature.....

Recommended by..... Date Signature.....

Checked by..... Date Signature.....

MANAGING APPROVAL..... **DIRECTOR**

CONNECTION CHARGES

Deposit Payable (Kshs.)Receipt No. Date.....

Connection Fee Payable (Kshs.)Receipt No. Date.....

Other Charges Payable (Kshs.)Receipt No. Date.....

CONNECTION DETAILS

Connection Number Allocated.....
Route/Line.....
GPS
Coordinates.....
Meter Serial No..... Meter Size
.....
Meter Ownership..... Meter Type
.....
Turn on Reading
.....
Date of
Installation.....
Proposed Average Consumption (cubic meter/ month
)..... Connection Installed by
..... Date Signature.....

BILLING UNIT

Data Keyed in
by.....Date.....
Verified
by.....Date.....