



NZOIA WATER SERVICES COMPANY LTD.

P.O. BOX 1010 – 50205

Tel. KITALE 0773179894 WEBUYE 0774-484-801 BUNGOMA
0518008692 KIMILILI 0202410033 CHWELE 0775574660

info@nzoiawater.or.ke



**SERVICE
CONTRACT/AGREEMENT FORM**

NZOWASCO/COMM/SCF/23

Serial No:

APPLICATION FORM FOR WATER SEWERAGE CHANGE OF TENANCY METER SEPERATION+
 WATER SUPPLY AREA KITAI F RINGOM KIMII II I CHWFI WFRUYF

CONSUMER A/C
Plot/LR

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

DATE.....

No.....Location.....

I hereby request NZOWASCO to provide services applied for herein to the property indicated above and shown on the sketch overleaf and I hereby agree to abide by the terms and conditions water and sewerage service provision, payment of all water, meter rent, sewer conservancy and refuse collection charges as appropriate until such time as the agreement is terminated in accordance with conditions of service provision, company policies/procedures and Water Act 2002.

PLEASE PRINT IN CAPITALS

INDIVIDUAL CONSUMER	CORPORATE CONSUMER
Surname.....Other Names..... Postal Address..... ID. No./Passport No:.....(copy attached) PIN No.....(copy attached) Phone /Mobile no..... Detail of wife and husband where applicable ID. No./Passport No:.....(copy attached) PIN No.....(copy attached) Phone /Mobile no.....	Name of the Institution..... Postal Address..... Details of accountable person or persons (where applicable) Name..... ID No:..... Name..... ID No:..... Name..... ID No..... Phone/mobile no..... Nature of Business :..... Registration Certificate/Trade Licence/Certificate of Incorporation (copy attached). <i>(To be reviewed with time as office bearers change)</i>
EMPLOYER'S CERTIFICATE	DIRECTOR'S GUARANTEE
Name of Employer..... Postal Address..... If self-employed, Name/Nature of Business :..... I/We certify that: Mr./Mrs./Miss.....is employed by..... Signature..... Date..... Official Rubberstamp Registration Certificate/Trade Licence/Certificate of Incorporation (copy attached).	Name of Director..... Postal address..... I, the above named Director, hereby guarantee that bills in respect of the above connection shall be paid. I herewith undertake to notify the Water Undertaker on any change in ownership one month in advance. Signature..... Date Official Stamp.....

LAND LORD'S CERTIFICATE	FOR OFFICIAL USE ONLY
Name of Landlord.....Mobile/Phone..... Postal Address..... I, the above named Landlord hereby certify that the above named applicant is my tenant with effect from..... (Date) and herewith guarantee that bills in respect of the above connection shall be paid. I herewith undertake to notify the Water Undertaker on any change in tenancy one month in advance.	Customer Relations Officer:

CONDITIONS OF SERVICE PROVISION

- 1) This Agreement is between Nzoia Water Services Company Ltd. (The Company) and the (Consumer), and the services under this Agreement are not transferable. In case of changes of ownership or tenancy of the building, a new water agreement form must be entered into, and the Applicant must produce the last water bill receipt IF ANY). The Agreement supersedes any previous agreements that may have been entered into in respect of services provided by the Company and/or sewerage services provider.
- 2) The Water Act as from time to time amended shall be incorporated and to form part of these conditions of supply.
- 3) Nzoia Water Services Company Ltd Public Policies and Procedures as from time to time amended will be incorporated to form part of these conditions of supply.
- 4) Application for the execution of works will as rule be dealt with in the order of priority or date, but the Company reserves the right of executing the work in the manner and at the time best to its convenience.
- 5) All charges shall be payable on demand.
- 6) If any account is overdue, the service will be disconnected under provisions of the Services Provider Agreement (SPA) between Lake Victoria North Water Services Board and the company, and proceedings taken to recover the charges due.
- 7) Any changes in the charges and tariffs shall be approved by the Water Regulatory Board and in addition notification thereof shall be sent to each consumer with the monthly account or invoice bill preceding such change.
- 8) The Company shall have the right to forthwith and without notice to terminate the agreement for any breach by the Consumer to the conditions of service, but without prejudice to any antecedent right against the Consumer including the right to take proceedings.
- 9) This Agreement shall terminate immediately upon termination of the Service Provider Agreement between the Water Services Board and The Company.
- 10) No consumer shall use water supplied for other purposes except for such use as specified by him in his application in the service contract form.
- 11) The consumer shall make payment of a security deposit as specified by the Company approved tariff which shall be retained by the Company for the period during which the consumer is provided with water and sewerage service, or maintains a connection. The amount will be refunded to the consumer upon termination of the agreement and production of the original deposit payment receipt. No interest is payable by the Company on such deposit payments.
- 12) The consumer shall meet all charges in respect of water and sewerage services provided in pursuance of this agreement until such a time as the service is discontinued pursuant to a written request made by the Consumer.
- 13) The consumer shall be responsible for the safe custody of the meter including the pipeline immediately after the water meter towards his house or premises up to the first manhole discharging to the main trunk line.
- 14) It is the responsibility of the Consumer to give access to the meter and premises to The Company or its authorized agents who shall reserve the right to disconnect at the mains in the event of no such access being granted at the cost of the Consumer.
- 15) The consumer shall state other connections held by him/her spouse; **Account No:**
 - (i)(iv)(vii)
 - (ii) (v) (viii)
 - (iii)(vi) (ix)
- 16) Where a consumer has more than one account and debts relating to some accounts are not paid, the Company reserves the right to disconnect all or any account held by that Consumer irrespective of the status of that or those account(s) at that particular time.
- 17) The company reserves the right to reject this application or withdraw the connection for any false and or incomplete information given.
- 18) The sewer lines may only be used for the disposal of permissible sewage and waste water.

I certify that the information given is true to the best of my knowledge.

Applicant Name.....Signature.....Date.....

Form Issued by.....Signature.....Date.....

SKETCH SHOWING LOCATION FOR CONNECTION (Road network). To be completed by Applicant	CONSUMER CLASSIFICATION	
	01 - SINGLE FAMILY	
	02 - MULTIPLE	
	03 - FLATS	
	04 - COMMERCIAL	
	05 - INDUSTRIAL	
	06 - INSTITUTIONS	
	07 - KIOSKS	
	08 - HOTELS/RESTAURANTS	
	09 - GOVERNMENT	
	10 - MUNICIPAL	
	11 - STATUTORY	
	12 - STAFF	
	13 - OTHER	
	14 - RELIGIOUS INSTITUTION	
	15 - SCHOOL	

I CERTIFY THAT INFORMATION GIVEN ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE.

NAME.....SIGNATURE.....DATE.....

REGION	ZONE	WALK		

NAME.....SIGNATURE.....DATE.....

OFFICER IN-CHARGE OF ZONE (METERING DEPUTY)

NAME.....SIGNATURE.....DATE.....3

OFFICER IN-CHARGE OF METERING (METERING SUPERVISOR)

TRANSFER FROM EXISTING ACCOUNT NUMBER

Date of Disconnection | | | | | | | | | |

Meter Reading | | | | | | | | | | | | | | | |

TECHNICAL DETAILS

Recommended Meter Size | | | | | Recommended Meter Type _____ (Yes or No) (Yes or No)

Pipeline Diameter | | | | | mm Pipeline Wall Material | | | | | At A.V. | | | | | At W.O. | |

ACCOUNT NUMBER | | | | | | | | | | | | | | | | / Date | | | / | | / | |

Meter Reading | | | | | | | | | | Meter Size | | | | | | Meter Rent | | | | | | Kshs

Meter Number | | | | | | | | | | | | | | | | Water Rate Code | | | | | | | | | |

Connection Fee | | | | | | / | | | | | Security Deposit | | | | | Receipt No. Date.
Kshs Cents

GPS Northing. Easting. Alt (ASL).

Application approved/Not approved SURVEY FORM NO.

OLD METER **FROM A/C NO.** **RD.**

Comments.....
.....
.....

Stores;-NameSignature.....Dare.....

FOR INTERNAL USE:

Operation and Maintenance Officer:
Signature.....Date.....

SEWERAGE OFFICER.....
Signature.....Date.....

Commercial Manager.....

Signature.....DATE.....

Regional Manager:

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

KEYED IN BY	SIGNATURE	DATE

