



City of Locust

Post Office Box 190
Locust, North Carolina 28097-0190
(704) 888-5260

City of Locust Sewer Application

Name: _____

Address: _____

Billing Address: (if different from above);

Home Phone #: _____

Cell Phone #: _____

Work Phone#: _____

DL#: _____

Date Moved In: _____

Trash can (check if one is needed): _____

Recycle Bin (Check if one is needed): _____

Would you like to sign up for ACH Draft: Yes _____ No _____

Deposit: \$50 Pd via: Check # _____ Cash _____

Date Paid: _____

Signature _____

Receipt #: _____

Entered into System by: _____

Date Entered: _____

Approved By: _____