



Enroll in Water Line Protection

Date: _____

Account Number: _____

Customer Name: _____

Address: _____

Please enroll my account in the Kingsbury General Improvement District ServLine Water Line Protection Program for the monthly charge of \$4.62 added to my utility bill.

Signature: _____

Please submit form to julie@kgid.org or fax 775-588-3541.

Thank you.

