MANDERA WATER AND SEWERAGE COMPANY

WATER APPLICATION FORM

Application No: _	
Account No:	



MANDERA KENYA. PLEASE FILL ALL RESPONSES WHERE APPLICABLE IN CAPITAL LETTERS AND TICK IN THE APPLICABLE BOX APPLICANT/CUSTOMER DETAILS Last Name/Company Name: Other Names: Passport/ID No: PIN NO: Email Address: Tel. No: Paid Not Paid Service Charge Amount:KES Applicant's Signature: Date: Applicantion Received By Designation: Revenue In Charge Name: Signature: Date: OFFICIAL USE ONLY I have accepted the deposit payment made by the applicant.Further, I confirm that the required service has being deligently provided. Verified by: Name: Designation: Assistant Engineer Signature: Authorized by: Date: Name: Designation: Commercial Manager Signature: Date: