



16318 Great Oaks Drive • Round Rock, Texas 78681

Phone (512) 255-7871

Email: CustomerService@bcmud.org • Website: www.bcmud.org

SERVICE REQUEST Utilities

Applicant Information

Name: _____

DL#/Tax ID: _____ St: _____ Email: _____

Main Phone: _____ Hm Wk Cell Alt. Phone: _____ Hm Wk Cell

Please indicate property type: _____

Service Request Information

New Transfer* Final

Service Request Date: _____

*Please Note – Transfer is to be used if you currently have service with BCMUD and are moving within a two-week period to another property within our service area.

Have you previously been a resident of Brushy Creek MUD? Yes No

If disconnecting, will this property be maintained by you for investment and/or rental purposes? Yes No

Property Type:

Own I own the property, rent it out

Rent Would you like the landlord listed on the account? We cannot discuss account details with anyone that is not on the account

Yes No

Please provide the landlord's name and phone number _____

Service Address: _____ City: _____ ST: _____ Zip: _____
 Billing Address (Same as Above) Billing Address (Below) Forwarding Address (Below)

Address: _____ City: _____ ST: _____ Zip: _____

Authorized Account Individuals

Name: _____ Hm Wk Cell _____

Name: _____ Hm Wk Cell _____

Name: _____ Hm Wk Cell _____

CONFIDENTIALITY OF PERSONAL INFORMATION. Under Section 182.052 of the Texas Utilities Code, an individual customer's address, telephone number and social security number, along with information relating to the volume or units of utility usage or the amounts billed for utility usage, are confidential unless a customer requests that a government-operated utility disclose the information. If you request that the District disclose such personal information, please mark the box below, initial it, and return this form to the District by mail or electronically at the following email address: customerservice@bcmud.org. A customer may also rescind a prior request for disclosure by marking the box below, initialing it, and returning this form by mail or electronically at the same email address. The following link may also be used by individual customers to request disclosure of personal information, or to rescind a prior request for disclosure of personal information:

I (we) authorize the District to disclose personal information. Initials _____

I (we) rescind a prior request that the District disclose personal information. Initials _____

Would you like to be paperless and have your bills emailed to you? Yes No

Signature: _____

Date: _____

Please Note – Request made will be processed twenty-four (24) hours after contact by BCMUD and payment (deposit / Admin Fee) is made. Service request can only be made Monday – Friday's except for holiday's and extenuating circumstances.

For Staff Use Only

Received By: _____ Date: _____

Receipt #: _____ Work Order #: _____

Payment Type
 Cash Check Credit Card

Standard 5/8" Meter Deposit (\$100) + Admin Fee (\$30) = \$130

3/4" Meter Deposit (\$150) + Admin Fee (\$30) = \$180

_____" Meter Deposit + \$30 Admin Fee (____)

Transfer Fee - \$30

Same Day Surcharge 8 a.m. – 5 p.m. - \$90

Weekends & Holidays Surcharge - \$60

Afterhours 5 p.m. – 8 a.m. Surcharge - \$60

Account # _____