



Dry Creek Water Association Inc.

3671 West Edgewood Dr. Port Angeles, WA 98363

Office: (360)452-2780 Cell: (564)215-1131 Email: drycreekwater@gmail.com

Residential Shareholder Application

Residential service size is $\frac{3}{4}$ " only

Date _____

Applicant Name(s) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Telephone #'s Home _____ Work _____ Cell _____

Email _____

Street Address/Name _____

(Copy of map or drawing must be included for the Dry Creek Water Board of Trustees review).

Legal Description of Property _____

Clallam County Property ID # _____

Is this property located within Port Angeles City Limits or Clallam County? (Circle One)

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Completion of the following information is voluntary. The following data is collected for Federal statistical purposes only. Please indicate one of the following racial categories:

\_\_\_\_\_ White \_\_\_\_\_ Black or African American \_\_\_\_\_ American Indian or Alaska Native  
\_\_\_\_\_ Asian \_\_\_\_\_ Native Hawaiian or Other Pacific Islander

This information will assure the Federal Government that Federal Laws prohibiting discrimination against applicants based on race are complied with. This information is evaluating your application or to discriminate against you in any way. However, if you choose not to furnish the information, the Association is required to note the race of individual applicants based on visual observation or surname.

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### OFFICE USE

Shareholder's Fee Paid: \_\_\_\_\_ Board Approval/Denial Date: \_\_\_\_\_