



CITY OF CIBOLO
WATER CLEARANCE AFFIDAVIT
FOR GREEN VALLEY SUD

Account Name: _____

Service Address: _____

Customer Signature: _____

Start Date: _____ Account Type: ___ Landlord ___ Owner ___ Renter

I confirm that the above listed individual has completed the application for Sewer Services with the City of Cibolo:

Cibolo Employee Signature: _____

Directions to GVSUD:

Take FM 78 East to Marion
Turn right on Center Street (traffic light), continue ½ mile to 529 S CENTER ST.

GREEN VALLEY SUD PHONE 830-914-2330