



Alabama Rural Water Association
2576 Bell Road, Montgomery, AL 36117

Employer Agreement Request Form

I request to be provided with and given the opportunity to complete an employer agreement for the
Alabama Rural Water Association
Apprenticeship Program and am legally allowed to provide the following information in consideration of the request.

System Name: _____
(Full Legal Name of System)

System PWSID/NPDES: _____
(System PWSID / NPDES Number(s))

System FEIN Number: _____
(System FEIN Number)

System Address: _____
(Number and Street, or P.O. Box, City, State, Zip)

Name/Role of Person Requesting Agreement: _____
(Full Name and Role)

Contact Phone Numbers:

Office: _____ (e.g. – 555-555-5555)

Cell: _____ (e.g. – 555-555-5556)

Other: _____ (e.g. – 555-555-5557)

Email Address: _____

(Applicant Signature)

Upon receipt of the completed form by any applicant, the employer will immediately forward this form to the:

Alabama Rural Water Association
2576 Bell Road, Montgomery, AL 36117
Fax: 334-396-7090
Email: apprenticeship@alruralwater.com

If you have any questions, please contact this office at 334-396-5511.