OWNERS APPLICATION FOR WATER SERVICE

SERVICE INFORMATION:

Date Escrow Closed: _____

PRIMARY OWNER INFORMATION:

Full Legal Name: _____
Employer Name: _____
Employer Phone Number: _____

Driver's License Number: _____
State Issued: _____ Date of Birth: _____

Social Security Number: _____

Primary Phone Number: _____
Alternate Phone Number: _____

Email Address: _____

SECONDARY OWNER INFORMATION: (If Applicable)

Full Legal Name: _____
Employer Name: _____
Employer Phone Number: _____

Driver's License Number: _____
State Issued: _____ Date of Birth: _____

Social Security Number: _____

Primary Phone Number: _____
Alternate Phone Number: _____

Email Address: _____

SERVICE LOCATION:

Service Address: _____

Mailing Address (if different): _____

REQUIRED DOCUMENTATION:

This application must be accompanied by the following:

- Copy of closing escrow documents
- Copy of valid photo identification for each applicant
- Required deposit and applicable fees

TERMS AND CONDITIONS:

By signing this application, the applicant(s) agree to comply with all District Rules and Regulations, now in effect or hereafter adopted, related to water service. Applicant(s) further agree to pay all water service charges promptly. In the event of nonpayment, applicant(s) shall be responsible for all costs of collection, reasonable legal fees, and interest at the rate of **18% per annum**, as permitted by law.

APPLICANT CERTIFICATION :

Applicant Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____

OFFICE USE ONLY

Transfer Fee: $55.00
Water Deposit: $70.00
Total Amount Due: $125.00

Payment Method:
☐ Check Check #: _____
☐ Cash
☐ Credit Card (Service fee: the greater of $1.95 or 2.5% per transaction)

Location Number: _____
Customer Number: _____

Employee Signature: _____ **Date:** _____

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