



Application for Residential Utility Service

Name of District: _____ Date: _____

Service Address: _____
Street City State Zip

Name of Resident: _____ Phone: _____

Water Service Effective Date: _____

Billing Address: _____
Street City State Zip

Rent or Own Property: (Circle Answer) Rent Own
(Provide Lease) (Provide Ownership Statement)

Employment: _____
Company Phone Address

Previous Address: _____
Street City State Zip

Drivers License: _____ (Must provide copy of photo ID/License)
State Number

Is Irrigation/ Sprinkler System Installed? _____ Pool/ Spa? _____

- Applicant is required to sign a Customer Service Agreement in order to receive service.

Applicant's failure to adhere to all requirements contained in the District's Rate Order may result in fines, penalties and a delay or denial of service establishment. A copy of the District's Rate Order is available upon request.

Date: _____ Signature: _____

Printed Name: _____

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