

CITY OF THE DALLES

Application for Water and/or Sewer Service - Residential PLEASE PRINT CLEARLY

PROOF OF IDENTITY IS REQUIRED

Please provide a photo-bearing document to establish identity, such as:

- ✓ State issued Driver's License OR State issued Identification Card
- ✓ Passport
- ✓ Documents containing an alien identification number and country of issuance; or
- ✓ Any other photo-bearing government issued document evidencing nationality or residence.

Name of Applicant _____ Effective Date _____

Spouse _____ Co-Applicant _____

Service Address _____

Mailing Address _____

Home Phone _____ Work Phone _____ Message Phone _____

Fax # _____ Email Address _____

Applicant Info:

Driver's License # _____ SS# _____ Date of Birth _____

Current Employer _____ How long _____

Employer Address _____

Spouse/Co-Applicant Info:

Driver's License # _____ SS# _____ Date of Birth _____

Current Employer _____ How long _____

Employer Address _____

Own _____ Rent _____ Landlord's Name _____

Landlord's Address _____

I/we, the applicant, hereby apply for the following designated Utility Services, Water Sewer and Stormwater, if applicable, and agree to:

- purchase from the City all of these designated services used on the premises, and
- to pay all utility bills and fees promptly in accordance with established City schedules, and
- to comply with and be bound by such ordinances, rules, regulations, and rate schedules as may be established by the City Council, and
- to notify the City in writing when moving or transferring any services.

I/we, the applicant, understand that this application, upon its approval, shall become a contract for service between the applicant and the City. All City equipment and lines must be accessible to City personnel at all times for meter reading and maintenance purposes. Temporary service interruptions may occur and pressures are not guaranteed.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

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City Use Only: Intake by _____ Location ID# _____

Work Order # _____ SDC# _____