

Start Water Service Application-Property Management

Service Information	
Service Address:	
Effective Date:	
Property Management Information:	
Company Name:	
Taxpayer Identification Number:	
Contact Name:	
Phone Number:	
E-mail Address:	
Owners Information:	
Owners Name:	
Contact Name:	
Phone Number:	
E-mail Address:	
Mailing Information (If Different From Service	Address):
Street Address or PO Box:	
City, State & Zip Code:	
Previous Service Address (If Had District Serv	ice Before)
Service Address:	
Preauthorized Payments	
Would like to signup for Preauthorized Payments ?	
YES (If yes please provide routing	number and account number) NO
Routing Number:	
Account Number:	
Management Company Responsibility	
agency is responsible for any unpaid debts that m property. We acknowledge and agree that a lien r We are aware that if a delinquency occurs on one	esponsible for the real property listed above, we understand our may accrue through the use of the District water consumed on the may be placed on the property should these debts remain unpaid. It accounts held are subject to disconnection. We are a placed on the property. We are aware that at the appropriate to close my account.
Applicant Name:	Phone Number:
Applicant Signature:	Date Signed: