

Telephone ~ 530-357-2121

5880 Oak Street Anderson, CA 96007 Fax ~ 530-357-3723

RENTER	'S APPLICATIO	ONS FOR WA	TER SERV	ICE
TODAY'S DATE:		_ACCOUNT NUM	1BER:	
MOVE IN DATE:				
NAME:				
SPOUSE'S NAME:		EMPLOYER:		
DRIVER'S LICENSE NO:		_SOCIAL SECURIT	Y NO:	
TELEPHONE NO:				
MAILING ADDRESS:				
SERVICE ADDRESS:				
BILLING INFORMATION	N: WOULD YOU L	IKE YOUR BILL	SENT VIA:	
E-MAIL: E-MAIL A	DDRESS:		or MAIL	
THIS APPLICATION	I MUST BE ACCOMP AND A SIGNED LEAS	ANIED BY THE PR E/RENTAL AGREE	ROPER FEES AI MENT	ND/OR DEPOSIT,
TURN ON AND/OR	TRANSFER FEE: \$54.3	IWATER DEF	POSIT: \$120	_ = \$174.31
AMOUNT PAID:\$	CHECK #	CASH	CREDIT C (+3	ARD_ % convenience fee)
	CAPACITY CHA	RGES:\$		
By signing this application, the app service, and to pay all bills promptly the rate of eighteen percent per and	licant agrees to abide by any v. The applicant shall pay all num.	District Rules & Regulati costs of collection and rec	ions now, or hereafte isonable attorney's fe	er adopted related to water es, together with interest at
Signature of applicant		Signature of CO	CCSD employee	·
	"We are an Equ	ual Opportunity Provider"		