

The City of Columbia City

PO BOX 189 - 1840 SECOND STREET
COLUMBIA CITY, OREGON 97018
(503) 397- 4010

APPLICATION FOR WATER AND SEWER SERVICE

TODAY'S DATE: _____ DATE SERVICE REQUESTED: _____

APPLICANT NAME(S): _____

LOCATION OF PREMISES SERVED: _____

MAILING ADDRESS (IF DIFFERENT): _____

CELL PHONE NO: _____ SECONDARY CELL PHONE NO: _____

E-MAIL ADDRESS: _____

SECONDARY E-MAIL ADDRESS: _____

APPLICANT(S) SOCIAL SECURITY NO: _____

APPLICANT(S) DRIVERS LICENSE NO: _____

SIGNATURE: _____

OWNER

RENTER

(*When a customer is a renter, a duplicate delinquent notice is mailed to the property owner of record. See immediately below.)

*If an applicant is not the owner of the property for which service is being requested, the owner must also sign the application:

I, (print name) _____, am the owner of the property for which water service is being requested. If the applicant fails to make payments in accordance with the rules, regulations, and ordinances of the City of Columbia City, I agree to be liable for those charges.

_____ Date: _____

(Signature of Rental Property Owner or Agent)

Deposit Fees: Residential Inside City Limits = **\$180.30** (\$83.86 for Water; \$96.44 for Sewer)
Non-Residential = Varies based upon EDU/water meter
Residential Outside City Limits = **\$104.86** (\$52.43 for Water; *Sewer not available*)

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OFFICE USE:

Deposit Receipt No: _____

Work Order No: _____

New Account No: _____

Previous Tenant: _____ Refunded

Old Application Replaced in Address File