Please include a COPY OF YOUR I.D.



## Please return completed application to:

City of Vallejo · Commercial Services · 555 Santa Clara Street · Vallejo, CA 94590 Phone: (707) 648-4345 Fax: (707) 638-3520 VallejoWaterBilling@cityofvallejo.net www.cityofvallejo.net

## APPLICATION TO START WATER SERVICE

Every effort will be made to begin services on your requested start date; however, some orders may be held until the following business day. All requests for service received before 5:00 p.m. will be processed the next business day after your application has been received and approved, based on field staff availability. Services cannot be started on any closed weekends or holidays. \*\*\*Please Fill Out Application Completely and Type or Print Clearly\*\*\*

■ Today's Date:										
■ Date you want wate	r service	to start:								
■ Address of Property to be Served:										
APPLICANT INFORM	ATION:									
Property Owner		ng or Leasi	ng		Property I	Mana	ger or Realtor			
Property Type:		/ Residence	esidence [		2+ Multi Family Residence			Commercia		
Is water service currently on at the property?						YES	NO		Don't Know	
Have you previously had water service with the City				ity of Valle	jo?	YES	□NO	L	ist Address:	
PRIMARY APPLICA	NT INF	ORMATIC	ON:							
■ Name of Applicant:										
■ Mailing Address:										
■ City:			State:				Zip Code	e:		
■ Home Phone:	Cell Phone			Phone:				Work Phone:		
■ E-Mail:										
Social Security Num	ber or Fe	ederal Tax	ID Numb	er:						
■ Drivers License Number:				·		Employer'	's Phone Nu	mber:		
■ Name of Employer:										
Address of Employer	:									
CO-APPLICANT INF	ORMA	TION (SP	OUSE, I	F MARRIE	ED):					
■ Name of Co-Applicar	nt:									
■ Home Phone:			Cell F	hone:	$\overline{\Box}$		v	Vork F	Phone:	
■ Social Security Num	ber or Fe	ederal Tax	– ID Numb	er:						
■ Drivers License Nun	nber:									
Name of Employer:										
Address of Employer										

service form is not received by the City all charges will continue to accumulate on the account until such notice has been received and accepted by the City. Please acknowledge by initialing to the left.

Initial Here



## APPLICATION TO START WATER SERVICE (CONTINUED)

	(CONTINUED)	
PROPERTY OWNER INFORMA	ATION:	
■ Name of Property Owner:		
■ Address of Property Owner:		
■ Home Phone:	Cell Phone:	
security deposit are R and return to City of Vallejo C information in one of the follow 1st Floor, or 2) Mail informatio 94590, or 3) Send via Facsin (When requesting a service st	ON, PROOF OF OWNERSHIP OR RENTAL AGREEMENT, A VALID PHOT EQUIRED TO ESTABLISH WATER SERVICE. Once completed, print and sign commercial Services Division with all the required documentation. You may return ving ways: 1) Deliver in person to City Hall Commercial Services Division 555 San on to City of Vallejo, Commercial Services Division, 555 Santa Clara Street, 1st Florille at (707) 638-3520, or 4) Send a PDF via Email to VallejoWaterBilling@city tart date, please allow for adequate mailing time). Commercial Services Division of applicable documents and payments for security deposit or other fees are received attorn is incomplete.	the application the requested ta Clara Street, cor, Vallejo, CA yofvallejo.net will not process
and multi-family applicants se shall be applied to the closing a new city service location, a applicant satisfies the City's e	required from all applicants who request single-family residential water service. Focurity deposit requirements, contact Commercial Services for the amount. The solil upon the discontinuation of services and any remaining credit will be refunded, new account will be opened and a new deposit may be required to start servicemption criteria. If multiple locations are serviced by the City, then a deposit may be due at the time services are activated.	security deposit  If you move to ices unless the
SIGNATURE AND ACKNOWLI	EDGEMENT:	
using appliances are not conhereby accept full responsible and employees from and agattorney's fees arising direct	y of Vallejo to turn on water at the above service address and understand the ompleted closed, or if there are any leaks, the premises may suffer water double for such damage and agree to indemnify, defend and hold harmless the Cainst any and all loss, liability, expense, cost claims, demands, suits and damally or indirectly related to the turning on of water service at the above service as sole negligence or wilful misconduct of the City.	lamage. I/We City, its officers ages, including
and pay all rates and charge all water regulations of the C any of the foregoing informa are unpaid. I/We represent	by apply for water service at the above service address. I/We agree to use the es for water service in accordance with Vallejo Municipal Code, Title 11, and the City of Vallejo. I/We understand that the City shall have the right to terminate we tion is determined to be false or untrue or if the required security deposit and/or and warrant that I am authorized to sign this application. I/We have read the of perjury under the laws of the State of California that the foregoing is true our knowledge.	to comply with water service if or monthly bills foregoing and
Primary Applicant Signature	Date:	
Co-Applicant Signature:	Date:	
Received by:	**Official Use Only**  Security Deposit Amount:  WATER SERVICE STARTED	
Date Received:	YES NO Other Charges Due:	
Date Completed:	Account Number Assigned:  Total Required to Start Service:	
Completed by:	Notes:	

Form 1 (Rev. 7/2022)