



\*Restrictions: No financial water assistance in the last 6 months, no irrigation accounts, no commercial accounts, valid federal ID, 30 days past due.\*

Applicant Name:  Account #:

Service Address:

Phone #:  Email:

Signature:  Date:

CSR: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ ID: \_\_\_\_\_