



City of Eureka
Finance Department
531 K Street, Eureka, CA 95501
(707) 441-4267
www.ci.eureka.ca.gov

Verified by: _____

Date: _____

City of Eureka Application for Water and Sewer

(Please Print Clearly)

Service Address: _____

Mailing Address: (same as above) _____



Applicant #1	
Last: _____	First: _____
DL#: _____	SSN: <u>XXX-XX-</u> _____
Phone #: _____	Email Address: _____

Applicant #2	
Last: _____	First: _____
DL#: _____	SSN: <u>XXX-XX-</u> _____
Phone #: _____	Email Address: _____

Business Name for Service (if applicable)	
Name: _____	
FED ID #: _____	Phone: _____
Email Address: _____	

Check One: Owner Tenant

Landlord Name: _____ Phone: _____

If you would like to give anyone permission to access the account, please list name(s) below:

*****By signing this application, you are acknowledging that you have read and understand the statement below.***** The applicant is responsible for making sure all valves on the premises are closed at the time the service is initiated. In the event there is an open valve and water is running on the property, the City representative may turn the service back off. Should this occur, you will need to contact our office during normal business hours (Monday-Thursday 9am-4pm) to schedule a time to get your water turned on. Our contact number is (707)441-4267. All service requests are considered complete on the date the service is requested. Regular monthly billings, **including base charges**, will begin per this request, even if consumption remains at zero.

Applicant #1 Signature: _____ **Date:** _____

Applicant # 2 Signature: _____ **Date:** _____

Office Use Only:	Account #: _____ - _____ - _____	Notes for Account:
Deposit: \$ _____ / Fee: \$ _____	Account Start Date: ____/____/____	