



# APPLICATION FOR CUSTOMER ACCOUNT

PLEASE RETURN THIS COMPLETED APPLICATION TO CITRUS HEIGHTS WATER DISTRICT  
6230 SYLVAN RD, CITRUS HEIGHTS CA 95610-5610  
PO Box 286, CITRUS HEIGHTS CA 95611-0286  
FAX (916) 725-0345 VOICE (916) 725-6873

Date of Application: \_\_\_\_\_ Service Start Date: \_\_\_\_\_ Date Escrow Closed: \_\_\_\_\_

Service Address: \_\_\_\_\_

Payment Enclosed

Upon Approval - Bill My Account

## OWNERSHIP INFORMATION

PLEASE PRINT CLEARLY

Owner's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M. I. \_\_\_\_\_

Co-Owner's Name: Last \_\_\_\_\_ First \_\_\_\_\_ M. I. \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(if different than Service Address)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate, in order of importance, the telephone numbers where you can be reached Mon-Fri / 8:00 AM - 5:00 PM

Phone 1: \_\_\_\_\_ Ext: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Ext: \_\_\_\_\_

Phone 3: \_\_\_\_\_ Ext: \_\_\_\_\_

Fax: \_\_\_\_\_

Owner's Place of Work: \_\_\_\_\_

Co-Owner's Place of Work: \_\_\_\_\_

Owner's Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Co-Owner's Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Previous Account # in District ? \_\_\_\_\_ Former Address: \_\_\_\_\_

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## CERTIFICATION

By signing this application, we agree to conform to all District ordinances, policies and procedures regarding water services. We understand and agree that water service may be discontinued for violation of these rules and for failure to pay in full the bill for water services by the due dates for each billing period. We have read and understand the following statements regarding service:

1. *The property owner is responsible for all plumbing, equipment and appliances from the point of connection to the District's system, which is typically located at the water meter connection.*
2. *The property owner is responsible for any damage to District equipment and facilities resulting from acts of the owner, tenants, agents, employees, contractors, licensees or permittees.*
3. *The property owner agrees that the District shall not be responsible or liable for damages or injuries resulting from interruption in service, changes in water pressure or quality of water or other unforeseen conditions or circumstances. It is understood that the District offers no guarantees, warranties or assurances regarding utility services and the quality of the water provided.*
4. *The property owner is responsible for maintaining unrestricted and unobstructed access at all times to District water meters and other District equipment and facilities located on their property. Access that is restricted by an obstruction shall be remedied by the property owner at their sole expense. If the property owner fails to remove the obstruction or restriction within 30 calendar days of written notification, the District may remedy the restriction or obstruction and any costs incurred shall be the sole responsibility of the property owner.*
5. *The property owner agrees to pay to the District, all charges and rates for the service provided pursuant to this application, including any costs related to the collection of amounts due. Under the California Water Code (Sections 22284 and 25806), the property owner is responsible for all unpaid amounts owed to the District resulting from service provided to the premises.*
6. *The property owner agrees that tampering with water meters or other District equipment and facilities is a punishable offense under Section 498 of the Penal Code of the State of California.*
7. *The Property owner understands that there is a non-refundable application fee of \$20.00 associated with the submission of this application in the amount set forth in the District's Water Rates and Miscellaneous Charges and Fees.*

**I certify that I understand and agree with the above statements regarding water service.**

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Owner's Signature

\_\_\_\_\_  
Date

### FOR USE BY CHWD ONLY

New Account #:	_____	Cycle:	_____	Date App Received:	_____
App Rcv'd by:	_____	SO #:	_____	Date of S/O:	_____
Mtr Read by:	_____	Reading:	_____	Date of read:	_____
Completed by:	_____	Create Bill:	_____	Date S/O Completed:	_____