



1880 ACACIA AVENUE
 PO BOX 710
 SUTTER, CALIFORNIA 95982-0710

Office #(530) 755-1733
 Fax # (530) 755-1777

APPLICATION FOR WATER SERVICE

DATE OF SER.: _____

_____	_____	<u>Homeowner / Tenant / Realtor</u>
Account # - Service ID #	E-Mail Address	Please circle one
_____	_____	_____
Last Name	First Name	Middle Initial
_____	_____	_____
Last Name (Spouse)	First Name (Spouse)	Middle Initial (Spouse)
_____	_____	_____
Service Address	City, State	Zip Code
_____	_____	_____
Mailing Address	City, State	Zip Code
_____	_____	_____
Home Telephone #	Cell Phone #	Work Phone #

Is there a well on property: Yes No Double Check Valve: Yes No

The Undersigned hereby request utility service at premises designated above, and waives claims for damages resulting from running water originating from leaks, open faucets, etc. on such property, and agrees to hold Sutter C.S.D. harmless from any such damages.

Signature

Date

New Account Service Fee: \$13.10
Security Deposit: \$40.00
 Pursuant to ordinance No.96-04