



CITY OF ONTARIO
Water Application On/Off

444 SW 4TH STREET
ONTARIO, OR 97914
Fax: (541) 881-3262 Phone: (541) 881-3246

Today's Date

Business Name, Contact, Last four digits of SS#, Account #, Federal Tax ID #, Address, Birth Year, Phone Number, State/Driver's License, Phone Number

- 1. Turn Water On 2. Turn Water Off 3. Owner 4. Rental 5. Property Manager

Service Address: STREET

Date

Mailing Address: STREET CITY STATE ZIP

New Service

E-Mail Address: Fax:

DO NOT WRITE BELOW THIS LINE - CITY USE ONLY

Meter Reading Information

Meter No. and Location, READING: DATE: WORK COMPLETED BY:

Meter Was Running

LEFT DOORHANGER

Work Order By:

DATE: INITIALS:

***METER LOCATION:

Rates

Table with 3 columns: Rates, Cost per 1,000 gallons. Rows include Water, Sewer, Storm, and UCF (Utility Capitalization Fee).

REQUIRED FOR UTILITY SERVICE: \$136.00 WATER DEPOSIT OR REFERENCE LETTER FROM ANOTHER UTILITY COMPANY

Deposit or Reference Letter

Deposit section: \$136.00 Water Deposit*, Date Paid, Completed By

Reference Letter section: Electric, Telephone, Gas

* Credit balances of less than \$5.00 at time of account closure will not be refunded.

The City is not liable for possible flooding, at this residence, when the meter is turned on at customer's request.

I do hereby specially request the City to provide water and sewer services to the above described property and do further agree to pay all charges for such services promptly and in accordance with the ordinances, rules and regulations of the City of Ontario.

X Signature: X Date: