

# ARMONA COMMUNITY SERVICES DISTRICT

## Application For Service

Please print clearly in blue or black ink only. **No markers.**

NAME:→

S.S.N.:→

PHONE#:→

DATE OF BIRTH:→

MAILING ADDRESS:→

SERVICE ADDRESS:→

Provide email address ONLY if you want paperless statements each month.

EMAIL:→

Check one:      OWN \_\_\_\_\_      \*RENT \_\_\_\_\_

\*Renters, please provide name and phone number of landord or property management.

NAME:→

PHONE#:→

### Important Notice:

In the event that you owe 2 months after the 18th of the month, you will accrue a late fee of 10% of your Past Due Amount and you will then receive a shut-off notice. All shut-off notices are due IN FULL. The following is required to start service: \$250.00 deposit, Photo ID, a copy of rental agreement showing applicants name or mortgage papers showing new ownership of property.

Signature of Applicant: →

Date: →

### CO-APPLICANT (Optional)

NAME:→

S.S.N.:→

PHONE#:→

DATE OF BIRTH:→

Signature of Co-Applicant: →

Date: →

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### OFFICE USE ONLY

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Meter #: \_\_\_\_\_

Starting Meter Read: \_\_\_\_\_

Start Date: \_\_\_\_\_

Account#: \_\_\_\_\_

Date \$250 Deposit Paid: \_\_\_\_\_