

SERVICE ADDRESS**START / STOP SERVICE**

SERVICE ADDRESS:		SERVICE DATE REQUESTED	
------------------	--	------------------------	--

UPDATE INFO	ACCOUNT NUMBER	DATE OF REQUEST	TENANT <input type="checkbox"/>	OWNER <input type="checkbox"/>	AGENT <input type="checkbox"/>
	NAME(S) ON ACCOUNT				PHONE
	SOCIAL SECURITY #		TEXT ALERTS OKAY? YES <input type="checkbox"/> NO <input type="checkbox"/>		
	MAILING ADDRESS IF DIFFERENT THAN SERVICE ADDRESS		EMAIL ADDRESS		
	CITY	STATE	ZIP		
	EMERGENCY CONTACT		EMERGENCY CONTACT PHONE		

REINSTATE	I/We hereby apply for water service at the service address above under the terms and conditions as approved by the Arizona Corporation Commission and agree to pay for the same at the approved rates. I agree to provide a minimum of three day notice for termination of service.				
	_____ Applicant Signature			_____ Date	
	Add Service Establishment fee to first bill YES <input type="checkbox"/> NO <input type="checkbox"/>				

Non refundable Service establishment fee \$35.00	_____
Refundable Deposit \$70.00	_____
Total	_____

APPLICATION	ACCOUNT NUMBER	DATE OF REQUEST	TENANT <input type="checkbox"/>	OWNER <input type="checkbox"/>	AGENT <input type="checkbox"/>
	NAME ON ACCOUNT		PHONE	PHONE	
	MAILING ADDRESS				
	CITY	STATE	ZIP		
	Deposit _____		Deposit Total _____		
	Interest _____		Final Bill _____		
Total _____		Final Balance _____			

DISCONNECT	NOTES:				

TERMINATION	Route # _____	Date _____
	Sequence # _____	Meter # _____
Meter Read _____		

Oak Creek Domestic Water Improvement District

90 Oak Creek Blvd, Sedona, AZ 86336, PH - 928 282-3404