



City of Richland
CUSTOMER SERVICE

505 Swift Boulevard
Richland, WA 99352
(509) 942-1104
Fax: (509) 942-7779
CustomerService@ci.richland.wa.us

Owner Application for Utility Services

Account Information

Customer - Account Number:
Service Street Address:
Apartment/Unit Number:
Effective Date:
Intended Use: [] Primary Residence [] Rental Property [] Other (please describe):

- [] Electric [] Water
[] Refuse [] Sewer
[] Stormwater [] Irrigation
[] Ambulance [] Rental Light(s)

Refuse Pick-Up Day:

Applicant Information

Primary Customer Name:
Driver's License Number: Province/State Issued:
Social Security Number: Date of Birth:
Mailing Address: Apt/Unit/Suite:
City: State: Zip Code:
Phone Number: Cell Phone: Work Phone:
Email Address:

Secondary Customer Name:

Driver's License Number: Province/State Issued:
Social Security Number: Date of Birth:
Relationship to Primary: Phone Number:

Lien Notice

Our records indicate there may be a balance and/or final bill owing at this address from a previous resident. If the full payment was not been received by the final bill due date, the City of Richland shall be compelled to enforce Municipal Codes 3.28 and 14.20.040, which may result in an interruption of service(s). Prior to an interruption of service(s), a phone call or letter will be issued to the customer signing this utility account form.

By entering into this service agreement, I hereby grant the City of Richland permission to enter and remain upon the property of the above service address for the purpose of installing, monitoring, repairing and/or terminating utility services described in this agreement. Such permission to enter and remain upon said property shall be effective for the duration of the service agreement.

The City of Richland Customer Service Representative explained the City's billing and collection policies. I understand any failure to comply with this agreement may result in interruption of utility services.

I acknowledge a New Account Fee of \$15.00 will be a onetime charge billed to my account to cover the cost of setting up a new customer-account. Termination requests must be submitted a minimum of one business day in advance.

I, the undersigned, request the City of Richland to provide utility services at the above service address and promise to pay in accordance with the City of Richland ordinance at rates established by the Richland City Council.

Primary Customer Signature

Date

CSR Signature

Date