



**TOWN OF CLARKDALE
PUBLIC WORKS**
890 Main Street
PO Box 308
Clarkdale, AZ 86324
(928) 639-2450
utilities@clarkdale.az.gov

REQUESTED
SERVICE START DATE

APPLICATION FOR SERVICE

SERVICE ADDRESS

Owner Renter (submit copy of first and last page of lease)

PRIMARY APPLICANT

(submit copy of Photo ID)

TELEPHONE EMAIL

SECOND APPLICANT

TELEPHONE EMAIL

MAILING ADDRESS

TRASH SELECTION LARGE SMALL 2nd CART

CUSTOMER ACCEPTANCE

I, the undersigned, hereby make application to THE TOWN OF CLARKDALE for water, sewer and/or trash services. I agree to pay for such services at the established rates for my usage classification, and in accordance with all rules and regulations as approved by THE CLARKDALE TOWN COUNCIL. I agree to use such services for my own purposes and further agree not to sell any part of the same, or permit such services to be used for any other purpose other than for my own purpose as allowed in my usage classification. I agree not to tamper with, or modify the water valve contained within meter box. I agree that the duly authorized agents and employees at said TOWN shall have access to my premise at all reasonable hours for the purpose of installation or removal of meters, and inspection of equipment incidental to carrying out this agreement, and I further agree to hold THE TOWN OF CLARKDALE harmless from any claims, real or alleged, for loss or damage to property or persons arising out of the delivery of services beyond the point of the metering.

I agree to give the said TOWN three (3) business days notice prior to vacating the premises and discontinuation of services. In the event of failure on my part to comply with the terms of this agreement, I agree that said TOWN, or its representatives, may discontinue services hereunder without further notice to me, and that discontinuance will not constitute waiver of any claims against me for prior services rendered hereunder by said TOWN. I also agree that if my account is sent to a collection agency as of my failure to pay that I will be liable for the collection agency fees and the outstanding amount due the TOWN.

You have signed up for TOWN services. This account is in your name and is your responsibility. Should you experience a leak of any kind at the property you own/rent, you will be liable for associated charges, and it will be up to you to work out reimbursement of the water bill with the property owner, landlord or property management company. Charges for leaks will be billed to you and will remain your responsibility.

(Initial)

If you are the property owner, your deposit will be applied to your account after twelve (12) months good payment history. Good payment history means NO late payments in twelve (12) months of consecutive billing. If you are not the property owner, your deposit will be applied to your final bill when you close your account.

(Initial)

Applicant's Signature

Date

(Please SAVE the form prior to returning via email.)

TOWN USE ONLY

Deposit

Account #

Establishment Fee

Service Order #

Photo ID

Trash DC

Copy of Lease