

CITY OF UKIAH / UVWA

APPLICATION FOR RESIDENTIAL UTILITY SERVICE

(PLEASE PRINT)

NAME

Please check which Entity applies:

CITY REDWOOD VALLEY WILLOW MILLVIEW CALPELLA HOPLAND RIVER ESTATES

TODAY'S DATE SERVICE START DATE

NAME CO-OCCUPANT

SERVICE LOCATION ADDRESS APT/UNIT #

MAILING ADDRESS (if different than location)

EMAIL ADDRESS

HOME PHONE #: WORK PHONE #: CELL PHONE #:

OWN/BUYING RENT AGENT IF RENTING, NAME OF OWNER

ADDRESS/PHONE:

PLEASE PROVIDE A COPY OF YOUR SIGNED LEASE AGREEMENT.

Has the City of Ukiah provided services to you before? Yes No If yes, at what address?

If no, please provide previous address:

SOCIAL SECURITY #: DRIVER'S LICENSE #: BIRTHDATE:

EMPLOYER EMPLOYER ADDRESS

OCCUPATION LENGTH OF PRESENT EMPLOYMENT

SPOUSE or CO-OCCUPANTS

NAME #1 RELATIONSHIP

EMPLOYER ADDRESS OCCUPATION

Cell Phone Social Security # Driver's License # Birthdate

NAME #2 RELATIONSHIP

EMPLOYER ADDRESS OCCUPATION

Cell Phone Social Security # Driver's License # Birthdate

Check boxes of utilities requested at this service location:

ELECTRIC WATER SEWER GARBAGE (CITY ONLY)

TWO PERSONAL REFERENCES (Local friend or relative not living with you)

NAME NAME

ADDRESS ADDRESS

Daytime Phone Daytime Phone

Relationship Relationship

PLEASE READ CAREFULLY BEFORE SIGNING

By signing this application and accepting utility service from the City I/we agree:

To comply with all of the City's Customer Service Policies, including those contained in the Ukiah City Code, Sections 3000-4073, as they now read or as they may be changed by the City Council, and those of the Ukiah Valley Water Authority. These Polices and Regulations are available on the City's website at www.cityofukiah.com and www.cityofukiah.com/uvwa/.

I/we understand and agree that every adult lawfully residing at the service location is jointly and severably liable for all of the charges for service at the location furnished as a result of this application.

I/we understand that the City of Ukiah reserves the right to adjust my security deposit and may bill an additional deposit not to exceed twice the monthly average of charges according to my/our past credit history; not less than \$150. Deposits are refundable after one full year of good credit (not to exceed one (1) Delinquent Notice). Deposits may be waived if a letter of good credit from another utility of recent service is presented.

I/we understand that the City shall have the right to terminate utility services if it discovers that any of the information I/we provided is untrue or incomplete.

THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF:

APPLICANT'S SIGNATURE DATE

CO-APPLICANT'S SIGNATURE(S) DATE

LAST

FIRST

MIDDLE

PROPERTY #

CUSTOMER #

UKIAH WASTE SOLUTIONS RESIDENTIAL GARBAGE AND RECYCLING SERVICE APPLICATION- CITY OF UKIAH CUSTOMERS ONLY

The City of Ukiah is acting agent for Ukiah Waste Solutions in the matter of accepting this application and billing for garbage services. There is a minimum mandatory charge to each residence for providing this service (City of Ukiah Municipal Code, Section 4443).

NAME of Occupant _____

ADDRESS of Property _____ Property # _____

SERVICE		CURB	
No refuse collection	G101	Garbage rates change periodically, please go to: www.cityofukiah.com for current rates.	
1 - 20 Gallon Can	G102		
1 - 32 Gallon Can	G103		
1 - 64 Gallon Can	G104		
1 - 96 Gallon Can	G105		

PACK OUT *		
G201	no svc	
G202	Garbage rates change periodically, please go to: www.cityofukiah.com for current rates.	
G203		
G204		
G205		

REMOTE **		
G301	no svc	
G302	Garbage rates change periodically, please go to: www.cityofukiah.com for current rates.	
G303		
G304		
G305		

* **Pack Out Service** is limited to the elderly and disabled who apply directly through Ukiah Waste Solutions @ (707) 234-6400.
** The additional charges of **Remote Service** may be required for certain areas with difficult access.

I/we hereby apply for the above requested collection and recycling service. I/we authorize Ukiah Waste Solutions to come onto the property (if necessary) to make this collection.

Signature of Occupant

Effective Date

Do you have a dog?



_____ NO
_____ YES _____ LARGE _____ MED _____ SMALL

Dog (s) Name _____

Friendly? Please circle one of the following.

Most of the time Sometimes Enter with Caution Do not Enter

FOR OFFICE USE ONLY

New residential accounts may be required to pay a deposit of twice the estimated average utility bill, but not less than \$150. The deposit may be waived if one of the following occurs:

1. The new customer presents a valid letter of credit from another utility company for services received in the previous 12 months.
2. The new customer has previously established and maintained a good credit history with the City of Ukiah within the past 12 months.
3. The new customer authorizes the City of Ukiah to run a credit scoring report to determine the amount of deposit.

Refundable Deposit (if applicable) *\$ _____ Waived Total _____

Non-refundable Service Charges Electric - \$38.00 Water - \$38.00 *if two services/split Total _____

Total Amount Collected _____