

**CITY OF WILDER
RESIDENTIAL SERVICE APPLICATION / FORMA DE SERVICIO**

DATE: _____

Service Address / Direccion de Servicio

| | | |
|--|--|--|
| | | |
|--|--|--|

Owner

Tenant

Property Owner / Agent Agreement. Attached if applicable.

Name #1 _____

Name #2 _____

#1 Driver's License # _____ #2 Driver's License # _____

State: _____

State: _____

Dogs - Yes _____ No _____ # of Dogs _____

How many people will reside in the home (including children) _____

Mailing Address if different than Service Address / Diression domas Si es Diferente:

| | | | |
|---------|------|-------|-----|
| Address | City | State | Zip |
|---------|------|-------|-----|

| | | |
|------------------------------|-------------------------|----------------------|
| #1 Home Telephone / Telefono | #1 Cell Phone / Message | #1 Work Place & Ph # |
|------------------------------|-------------------------|----------------------|

| | | |
|------------------------------|-------------------------|----------------------|
| #2 Home Telephone / Telefono | #2 Cell Phone / Message | #2 Work Place & Ph # |
|------------------------------|-------------------------|----------------------|

I agree to abide by the City of Wilder's Utility Billing Policies and agree to keep my account paid and in good sta

#1 Signature / Firma _____ #2 Signature / Firma _____

| | | |
|---|--|--------------------------|
| FOR OFFICIAL USE ONLY / Uso de Oficina | | Deposit: _____ |
| Acct # <input type="text"/> | | Date Deposit Paid: _____ |

Services Water Sewer Garbage # of Totes: _____

Irrigation Beginning Meter Read _____ Westown Disposal called

All Information Needs To Be Filled Out In Completion