

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
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#1 Home Telephone / Telefono	#1 Cell Phone / Message	#1 Work Place & Ph #
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#2 Home Telephone / Telefono	#2 Cell Phone / Message	#2 Work Place & Ph #
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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

Acct #

Deposit: _____
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