



City of Clatskanie
75 S Nehalem St.
PO BOX 9
Clatskanie, OR 97016
Office: 503-728-2622
Fax: 503-728-3297

APPLICATION FOR WATER SERVICE

DATE: _____ DATE SERVICE REQUESTED _____

APPLICANT NAME(S): _____

LOCATION OF PROPERTY SERVED: _____

MAILING ADDRESS (IF DIFFERENT): _____

HOME PHONE: _____ ALTERNATE PHONE: _____

Person's name who can be reached at alternate number: _____

E-MAIL ADDRESS: _____

I have read the rules and regulations on the reverse side and understand they will be strictly enforced by the city as a **condition** of continued water service.

SIGNATURE(S): _____ DATE: _____

OWNER

RENTER (*see immediately below)

*If an applicant is not the owner of the property for which service is being requested, the owner must also sign the application:

I, (print name) _____, am the owner of the property for which water service is being requested. If the applicant fails to make payments in accordance with the rules, regulations and ordinances of the City of Clatskanie, I agree to be liable for those charges.

_____ Date: _____

(Signature of Rental Property Owner or Agent)

Owner/Agent E-mail _____

Owner/Agent Mailing Address: _____

Owner/Agent Contact No.: _____

New Account Number: _____



1. There is a **\$30.00** Account Set Up Charge that will be collected at the time you sign up for water service and a Turn On Fee of \$35.00 if required.
2. The meter and turnoff valve are the property of the city and tampering with either item is prohibited by law.
3. All pipes, valves and connections from the meter to the business or dwelling is the sole responsibility of the property owner.
4. All water bills are mailed on the 30th of the month and are due no later than the 10th of the following month. A collection fee of **\$5.00** will be added to accounts that are **45** days past due.
5. If the bill is not paid within 45 days from billing date, a notice of termination of services will be mailed to your billing address. Failure to pay will result in termination of water service. To reinstate water service, the full balance plus any assessments and/or penalties must be paid to City Hall prior to reinstatement.
6. If you anticipate being unable to pay your bill in full, you may discuss payment arrangements at City Hall.
7. There is a **\$25.00** charge for returned checks.
8. Owners and/or tenants will be notified by first class mail of any accounts that are **30** days past due.