

Office Use Only	
Scanned <input type="checkbox"/> Int.	_____
Account #	_____
Rt# _____ CL.# _____	
Srv.#	_____
Seq.#	_____
Cycle# _____ Gp# _____	
Paid By: CK CA CC	

City of Alhambra

Application for Water Service—*Residential*

Service Turn on Date: _____ Deposit No.: _____

Date of Possession: _____ Deposit Amount: _____

Residential (includes trash) _____ Number of Units _____

Service Address _____ Owner Tenant

First Name _____ Last Name _____

Mailing Address _____ City _____ St. _____ Zip _____

Previous Address _____ City _____ Zip _____

Home Phone#() _____ Mobile Phone#() _____

Other Names Authorized on Acct. (1) _____ Password _____ Email _____

Place of Employment and City _____ Work Phone# _____

Social Security No. _____ Driver's License No. _____ St. _____

This Agreement for service shall at all times be subject to changes or modifications by the City Council of Alhambra, CA, as said Council may, from time to time, direct in exercise of its jurisdiction. I hereby guarantee prompt payment of all bills due or to become due for service furnished in accordance with the above application. All deposits are based on credit worthiness.

Owner or Guarantor Signature

Tenant or Application Signature