



Service Request/Credit Application

Service Location:		San Jacinto, CA	
New Customer Information			
Start Date _____	Owner _____	Tenant _____	Management Co _____
Company Name: (If applicable)			
First Name:			
Last Name:			
Driver's License #		State	
Social Security #		Federal Tax ID#	
Home Phone	()	Cell Phone	()
Work Phone	()	Alternate Phone	()
For Tenant Use Only			
Owner's Name:		Owner's Phone	()
Owner's Address:			
Mailing Address			
Street Address Or PO Box			
City, State, Zip			
Emergency Contact Information <small>Person not living at the service location</small>			
Name:		Phone	()

- I authorize the City of San Jacinto to perform a credit check to determine the amount of my deposit. I understand that a \$4 processing fee will be applied to my account.
- Do not run a credit check. I will pay the maximum deposit as required.

AGREEMENT: The applicant, in consideration of water service being supplied by the City of San Jacinto Water Department at the above named premises, agrees to pay for said services as bills are rendered at current rates UNTIL THE SERVICE IS ORDERED DISCONTINUED BY THE UNDERSIGNED. The deposit will be held until said account is closed. This contract shall, at all times, be subject to changes or modifications by the City of San Jacinto City Council as said Council may, from time to time, direct in the exercise of its jurisdiction.

Signature _____

Date _____