

**CITY OF COLSTRIP
RENTER'S SERVICE APPLICATION**

NAME _____ CO-APPLICANT _____

SOCIAL SECURITY # _____ SOCIAL SECURITY # _____

DATE OF BIRTH _____ DATE OF BIRTH _____

SERVICE ADDRESS _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE # _____

EMPLOYER _____ PHONE # _____

CO-APPLICANT _____ PHONE # _____
EMPLOYER _____

SERVICE APPLIED FOR: _____ WATER _____ SEWER
 _____ SINGLE FAMILY RESIDENCE _____ APARTMENT, DUPLEX, MULTI-FAMILY
 _____ COMMERCIAL/INDUSTRIAL _____ SCHOOL/GOVERNMENT AGENCY
 _____ IRRIGATION ONLY _____ AGRICULTURE ONLY

DATE SERVICE IS TO COMMENCE _____

This application is between the City of Colstrip and the customer, and the terms and conditions of this agreement incorporate all rules and regulations which govern utility services provided by the City of Colstrip. These rules and regulations apply to the services at the address on the application, in addition to any other local addresses in which the customer receives service.

Failure of the customer to fulfill their contractual obligations for service, including but not limited to nonpayment at this address or any other service address in the applicant's name, shall constitute non-compliance and subjects the customer to discontinuance of service at all locations in the customer's name. **If the tenant should receive one (1) termination notice, the utility bill will automatically be placed back into the property owner's name. If this should occur the renter will not be eligible to place water and/or sewer services in their name again as a renter.**

No customer shall re-meter, sell or permit others to use this service. In no case may a water line, pipe or hose be extended across or under public or private property, street or alley to provide water to another. A \$10.00 fee will be charged on past due accounts, a \$15.00 fee for mailed termination notices and \$25.00 fee for hand delivered termination notices. If service is terminated due to non-payment, the entire balance of the account plus a \$50.00 reconnect fee must be paid before services will be resumed.

Applicant Signature

Date

Co-Applicant Signature

Date

LANDOWNER

PROPERTY OWNER OR AGENT _____

CONTACT NAME (If different than Property Owner) _____

MAILING ADDRESS _____

PHONE # _____

DATE RENTER BEGAN OCCUPANCY _____

I hereby give permission for the water and sewer utility bill to be placed in the renter's name at the above address. I am aware that the property owner is still responsible for the bill per the Rules and Regulations Governing Utility Services for the City of Colstrip. If the tenant should receive one (1) termination notice, I understand the utility bill will automatically be placed back into the property owner's name. If this should occur the renter will not be eligible to place water and/or sewer services in their name again as a renter.

I understand that acceptance of the applicant does not relieve the property owner of financial or any other responsibilities regarding water and sewer service to this property.

Property Owner or Agent Signature

Date

City Use Only

Account # _____

Date Application Received _____

Approved By _____

Date _____