



CITY OF PITTSBURG

Water Department

65 Civic Avenue, Pittsburg, California 94565-3814
Telephone: (925) 252-4940 Email: pc@pittsburgca.gov

WATER ACCOUNT APPLICATION

APPLICATION MUST BE FILLED OUT IN BLUE INK!!!

Open Account Under: Owner Tenant Agency

SERVICE ADDRESS: _____

*** OWNER INFORMATION ***

First Name: _____ Last Name: _____

Mailing Address: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Driver's License Number or Social Security Number: _____

Owner Signature: _____ **Date:** _____

**I, the property owner, am aware that I will be held responsible for any unbilled water usage prior to the tenant/agency's date of occupancy. NOTE: Proof of ownership may be required if owner's name is not updated in the county's records in parcel quest.*

*** TENANT INFORMATION ***

Date of Occupancy: _____

First Name: _____ Last Name: _____

Mailing Address: _____

Email Address: _____ DL # or SSN #: _____

Home Phone: _____ Cell Phone: _____

Secondary Tenant (If Applicable): _____

Secondary Tenant Driver's License or Social Security Number: _____

Tenant Signature: _____ **Date:** _____

Owner Signature: _____ **Date:** _____

**I, the property owner, confirm and authorize above tenant's occupancy of my property. In the property owner's absence, please enclose ORIGINAL notarized documents (pages 3 & 4 Verification of Property Ownership) with the application.*

*** AGENCY INFORMATION ***

Date of Agreement: _____

Company Name: _____

Primary Contact Person: _____

Mailing Address: _____

Email Address: _____

Business Phone: _____ Cell Phone: _____

Company Tax I.D. Number: _____

Agency's Representative Signature: _____ **Date:** _____

Owner Signature: _____ **Date:** _____

**I, the property owner, confirm and authorize above Agency's management of my property. In the property owner's absence, please enclose ORIGINAL notarized documents (pages 3 & 4 Verification of Property Ownership and Lease) with the application.*

PMC 13.12.100

The City shall require proof of legal property ownership or tenancy along with a valid identification to establish a water service billing account. Require landlords to accompany tenants when establishing a new water account or complete notarized form confirming authorized occupancy for the property.

The City may collect a security deposit of \$250 prior to establishing a new residential water account.

CUSTOMER RESPONSIBILITIES:

- I hereby request water service at the premise designated and agree to pay at the rate as prescribed by the City’s Water/Sewer Ordinance and resolutions now in effect.
- All bills are net upon receipt and payments received after the due dates will incur a penalty of 10% of the bill.
- Service may be terminated with an outstanding balance of over 60 days. In order to restore service, the past due amount must be paid in full and a fee paid for reconnection of service as established by the City’s Ordinance and Resolution.
- I will keep the meter(s) accessible at all times and will not restrict access by locking doors, fences, or by placing animals or other barriers in the yard which would unreasonably restrict access to the meter.
- I shall be responsible for all service charges relating to this application until the date I notify the City of Pittsburg for the discontinuation of these services. A confirmation number will be provided to ensure the request has been processed.

PRIOR ACCOUNT LIABILITY: (To Be Completed by Account Holder)

I hereby guarantee the City of Pittsburg that I do not have any water accounts that need to be cancelled and I do not have any outstanding balances owed on any previous accounts with the City. I understand that any undisclosed accounts will result in the City requiring an immediate payment of all past due balances, a \$250.00 deposit, and/or disruption of water service at my new location.

I hereby request that my water service remain active at _____ Pittsburg, California until I notify the water department on a future date for cancellation. I understand that leaving the account active in my name will result in my being billed for any water usage until I officially close the account in my name and receive a confirmation number from the City of Pittsburg. I further understand that any outstanding account balance of over 60 days at the above address can result in disruption of water service at my new location or all prior balances being sent to collections.

Customer Signature: _____ **Date:** _____

***** FOR WATER STAFF ONLY *****

<input type="checkbox"/> Verified ID	<input type="checkbox"/> Check prior account history
<input type="checkbox"/> Verify ownership via Parcel Quest	<input type="checkbox"/> Deposit Paid
<input type="checkbox"/> Verified business license	



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VERIFICATION OF PROPERTY OWNERSHIP AND LEASE

APPLICATION MUST BE FILLED OUT COMPLETELY BY THE OWNER IN BLUE INK!!!

SERVICE ADDRESS: _____

**(Additional service addresses for property management and leasing agency may be listed at the back of the form).*

*** OWNER INFORMATION ***

First Name: _____ Last Name: _____

Mailing Address: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Driver's License Number or Social Security Number: _____

NOTE: Proof of ownership may be required if owner's name is not updated in the county's records in parcel quest. Original paperwork is required. No faxed or photo copies will be accepted.

*** TENANT/AGENCY INFORMATION ***

Beginning Date of Contract/Occupancy: _____

Tenant Name: _____

Secondary Tenant (If Applicable): _____

Property Management/Leasing Agency: _____ Phone #: _____

Management Contact Name _____

Owner Signature: _____ **Date:** _____

I, the property owner, confirm the above information to be correct and authorize the above tenant's occupancy at my property or the above agency to act on my behalf when establishing water service with the City. I am aware that I will be held responsible for any unbilled water usage prior to the tenant/agency's date of occupancy that I have listed above.

NOTARY ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of _____)

On _____ before me, _____
(insert name and title of the officer)

Personally appeared _____

Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal,

Signature _____

(Seal)

**Additional service addresses for property management and leasing agency:*

SERVICE ADDRESS: _____

SERVICE ADDRESS: _____

SERVICE ADDRESS: _____

SERVICE ADDRESS: _____

SERVICE ADDRESS: _____

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