

# Utility Application/Update Form



Service Address _____			
Effective Date _____	Start <input type="checkbox"/>	Stop <input type="checkbox"/>	
New Owner <input type="checkbox"/>	New Renter <input type="checkbox"/>		
New Construction <input type="checkbox"/>	Update <input type="checkbox"/>		

**Proof of Purchase and/or Rental Agreement must be provided at time of application. It can be brought in or mailed to: 170 S Oak Street, Colville WA 99114 or faxed to 509-684-5030.**

Customer Name: \_\_\_\_\_ Spouse Name \_\_\_\_\_

Customer Mailing/Forwarding Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Business/Emergency Phone \_\_\_\_\_

Customer's Drivers License # and State \_\_\_\_\_

Spouse's Drivers License # and State \_\_\_\_\_

\_\_\_\_\_  
**Signature of applicant** **Print Name** **Date**

**Must be completed if you are a renter - OWNER/MANAGEMENT COMPANY INFORMATION:**

By RCW .35.21.217 the City may "provide the property owner or the owner's designee with duplicates of tenant utility service bills, or may notify an owner's designee that a tenant's utility account is delinquent." **As the owner is ultimately responsible for any unpaid utility bills, the City complies with this statute in its entirety. When a utility account is in a tenant's name, the owner or the owner's designee shall notify the city in writing within 14 days of the termination of the rental agreement and vacation of the premises.** (Ord. 1491 NS § 1, 2012. Formerly 13.20.027). NOTE: The utilities cannot be changed until the previous balance/final bill is paid in full.

Owner/Management Company \_\_\_\_\_ Contact Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City, State and Zip \_\_\_\_\_

Phone \_\_\_\_\_

\_\_\_\_\_  
**Signature of Owner/Management Company** **Print Name** **Date**

**For City of Colville Use Only:**

Was copy of rental agreement provided?      Yes       No

Was proof of purchase provided?              Yes       No

Current Account Number \_\_\_\_\_      New Account Number \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

City of Colville  
 170 S Oak Street  
 Colville WA 99114  
 509-684-5091 Utility Billing  
 509-684-5030 Fax