

City of Cottage Grove
400 E Main St
Cottage Grove, OR 97424
Phone: 541-942-3346



Fax: 541-942-5125
E-mail: cgwater@cottagegrove.org

Water/Sewer Utility Service Application

Service Address: _____ Account #: _____
Date Needed: _____ Is this a business? _____ Or a residence? _____

Have you and/or Co-applicant had service with the City of Cottage Grove previously? YES / NO
If yes, when? _____ Where? _____

Owner Renter *****COPY OF RENTAL AGREEMENT REQUIRED*****
If renter, Landlord Name and Phone # _____

Primay Applicant: *****PHOTO IDENTIFICATION REQUIRED*****
NAME: _____ Phone # _____
DR LIC # _____ SS# (OPT) _____
Mailing Address (if different) _____
City/State/Zip _____

Co-Applicant:
NAME: _____ Phone # _____
DR LIC # _____ SS# (OPT) _____
Mailing Address (if different) _____
City/State/Zip _____

I/WE HEREBY AFFIRM THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT. I/WE WILL ASSUME THE FULL RESPONSIBILITY OF ALL FINANCIAL OBLIGATIONS AT THE ABOVE SERVICE ADDRESS UNTIL I/WE HAVE NOTIFIED THE CITY IN WRITING TO DISCONTINUE SERVICE. I/WE HAVE RECEIVED A COPY OF THE CITY OF COTTAGE GROVE'S UTILITY POLICY AND WILL ADHERE TO ALL RULES AND REGULATIONS STATED IN THIS POLICY. **Application for Service 13.04.030** - The customer shall pay a nonrefundable service turn on fee, of \$35.00 **Cash Deposits Ordinance 13.04.070** - Before water service is turned on, applicants who do not own the property to be served shall do one of the following: **A)** Make a cash deposit as set out in this code in the "Fee Schedule". **B)** Submit a letter of recommendation from a utility company (water, power, gas, electric) which has provided service to the applicant within the previous three months. **C)** Have a previously established record of good credit.

I hereby promise to pay all bills for such service when due, and abide by all ordinances regulating the use of City utilities and any other rules and regulations which may be adopted by the City Council concerning said service.

Applicant Signature	_____	Date	_____	Co-Applicant's Signature	_____	Date	_____
Service fee Paid	<input type="checkbox"/>			Rental Agreement	<input type="checkbox"/>		
Deposit Paid	<input type="checkbox"/>			Photo ID	<input type="checkbox"/>		
Letter of Credit	<input type="checkbox"/>						
Date:	_____			Clerk:	_____		