



CITY OF VICTORIA

APPLICATION FOR UTILITY SERVICES

WATER ☆ SEWER ☆ SOLID WASTE

NAME _____ TELEPHONE _____

SERVICE ADDRESS _____

MAILING ADDRESS _____ Commercial _____ Residential _____

PREVIOUS VICTORIA ADDRESS _____

PLACE OF EMPLOYMENT _____

SPOUSE NAME _____

PLACE OF EMPLOYMENT _____

NAME OF PROPERTY OWNER _____ TELEPHONE _____

Certain information (Address, Telephone number, etc.) is considered "public" unless you instruct the City of Victoria to not disclose it. Please check the appropriate box to allow release or to maintain confidentiality. Yes, you may release No, DO NOT release

If you are a newcomer to the community, please note that not releasing the information would prevent businesses from contacting you to provide you with special offers, products or services. The information, however, would not only be limited to release to businesses offering services to you. Any member of the public may seek disclosure of your information.

The applicant acknowledges that he/she is liable for payment of services.

NOTE: PER CITY CODE, A 10% PENALTY IS ADDED TO THE BILL IF NOT PAID WITHIN 14 DAYS OF BILL DATE. A \$25 NON-PAYMENT FEE IS ADDED IF NOT PAID BY THE DUE DATE SHOWN IN SECOND NOTICE.

SIGNATURE _____ DATE _____

If you are unable to digitally sign this certificate, please submit it without a signature and a Customer Service Representative will contact you.

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