



WATER SERVICE AGREEMENT

ACCOUNT NO. _____

**CITY OF RAINIER
106 WEST "B" STREET, PO BOX 100
RAINIER, OR 97048
503-556-7301 FAX 503-556-3200**

WATER SERVICE ADDRESS

SERVICE DATE

BILLING NAME

PHONE NUMBER

BILLING ADDRESS

NAME OF PROPERTY OWNER

PHONE NUMBER

ADDRESS OF PROPERTY OWNER

As an applicant for service I acknowledge and accept the following responsibilities:

- There is a **\$50.00 water deposit** that will be paid at the time the account is set up. We accept check, cash or money orders.
- The meter and turnoff valve are the property of the city and tampering with either item is prohibited by law.
- All pipes, valves and connections from the owners side of the meter to the business or dwelling is the sole responsibility of the property owner.
- All water bills are due the 15th of every other month. A late charge is applied to accounts paid after the 15th.
- If it is necessary for a city employee to shut off water at the business or dwelling the following charge applies: SHUT OFF \$25.00.
- There is a charge of \$20.00 for returned checks.

I have read these rules and understand they will be strictly enforced by the city as a condition of continued water service.

Signature

Date

For Office use only

Deposit Date

Receipt Number

Amount