



FINANCE DEPARTMENT
1100 E. PARLIER AVENUE
PARLIER, CA 93648
(559) 646-3545

SERVICE ADDRESS:

MOVE-IN DATE:

POSTED BY:

EMAIL TO MID-VALLEY ON:

EMAIL TO PW ON:

Receipt:

COPY OF ID

COPY OF HOMEOWNER DOC

DEPOSIT OR CR

\$200.00 DEPOSIT

OR

CREDIT REPORT

credit report with full
history obtained within 30 days

Do you need trash cans?

Yes ☐ NO ☐
BR ☐ BL ☐ GR ☐

Is water turned on?

Yes ☐ No ☐

Meter#:

Serial#:

Reading:

APPLICATION SEWER, WATER AND SOLID WASTE

ACCOUNT NUMBER:

APPLICANT'S INFORMATION

NAME:

PHONE #

ID#/DL:

RENTER'S NAME

PHONE #:

*In order to comply with guidelines, we request that you
voluntary provide the following information to be used for
research and evaluation purpose.*

MALE

FEMALE

ETHNICITY

HISPANIC OR LATINO

NON HISPANIC OR LATINO

RACE

AMERICAN INDIAN/ALASKA NATIVE

ASIAN

BLACK OR AFRICAN AMERICAN

NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

WHITE

FORWARDING ADDRESS

ADDRESS:

APPLICANT'S AGREEMENT: The undersigned subscribed requests you to supply service at the premises noted hereon and promises to purchase the same in accordance with the schedule rate of the City of Parlier and abided by local ordinances, rules and regulations. The undersigned guarantees that the above premises are in condition to make the changes above requested, and waive any and all claims for damages which may from date hereof arise from turning on or off the water service at the above address, and agrees to hold the City of Parlier, its officers, agents, and employees harmless from any damages to any landowner, tenants, person, person or corporation which may arise from turning on or off the water service at said premises.

APPLICANT'S SIGNATURE

DATE