



City of Tualatin

18880 SW Martinazzi Ave
Phone (503) 691-3056
Fax (503) 692-0147
billing@tualatin.gov

RESIDENTIAL

UTILITY SERVICE APPLICATION

APPLICANT:

First Name: _____ Last Name: _____

Have you had an account with us within the last 3 years? Y / N

Mailing Address: _____
Street City State Zip

Home Phone: _____ Cell Phone: _____

E-mail: _____ Drivers License #: _____

Employer: _____ Employer's Phone: _____

Date of Birth: _____

SERVICE DETAIL:

Service Address: _____

Start Service Date: _____ The water is currently: ON / OFF

Bring in the signed application and picture ID one day prior to start date. You may also email the completed application to: *billing@tualatin.gov* (Please note we do not work Saturday, Sunday or Holidays.)

Do you own this property: Y / N If renting, please provide owner's contact information below:

Owner's Name: _____

Phone Number: _____

Mailing Address: _____

AGREEMENT TO COMPLY WITH TERMS OF SERVICE:

Tualatin City Ordinance 839-91 requires this application. In consideration of the city making available or providing city utilities or services such as water, sewer, storm drainage, and road maintenance, the Applicant agrees to comply with applicable city codes and regulations.

We are pleased you have chosen to make Tualatin your new home and hope you enjoy this fabulous community.

The Applicant further agrees to notify the city in writing the date that Applicant ceases to need city services or otherwise vacates the premises served.

Signature: _____

Date: _____