

cityofjosephoregon@gmail.com
541-432-3832

201 N. Main Street
Joseph, OR 97846

City of Joseph Water and Sewer Customer Utility Service Form

Date: _____

Name on Account _____

Service Address _____

Business/Home # _____ Cell # _____ Email _____

Date Service is to begin _____ Time _____ Sprinkler System (*circle one*) Yes No

Billing Address if different _____ City, State, Zip _____

Commercial property (*circle one*) Yes No If yes, name of business: _____

Driver's License number: _____ State issued _____ Do you own or rent property _____

If renting name of property owner _____ Phone _____

Please read the disclosures below carefully. Initial next to each statement to indicate you have read and understand the information fully.

_____ There is a \$50.00 fee to turn water and sewer on and a \$50.00 fee to turn water and sewer off each time.

_____ City charges actual cost to reread meters. Please do not park or block meters.

_____ There is a \$100.00 fee to test customer meter.

_____ A lien will be placed on property if an account in the owner's name remains unpaid.

_____ Late fee will be applied to this account at 30 days past due.

_____ Customers requesting service be interrupted will be charged turn off and on fees.

_____ Customer is responsible for cost to repair or replace meter or supplies if lost or damaged.

Your signature verifies the information above if accurate. If city finds information above is inaccurate utility services may be turned off until all information is provided.

Signature

Date

Office Use

Turn on / off fee: Billed Collected

Notes: _____

Account #: _____ Clerk: _____