



CITY OF RIGBY
158 W. Fremont Ave. Rigby, Idaho 83442
Phone (208) 745-8111 EXT. 115

UTILITY SERVICE APPLICATION

Applicant Type

- Property Owner
 Property Manager
 Tenant

Applicant Name	Co-Applicant Name (IF APPLICABLE)		
Driver's License	Driver's License		
SSN	SSN		
Phone	Phone		
Email Address	Service Start Date		
Service Address	City, State, Zip		
Mailing Address (IF DIFFERENT FROM SERVICE ADDRESS)	City, State, Zip		
INFORMATION FOR GOVERNMENT MONITORING PURPOSES The City provides utility services without regard to race, color, national origin, gender, age, or disability			
Applicant <input type="checkbox"/> I do not wish to furnish this information <input type="checkbox"/> I voluntarily share this information Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Sex <input type="checkbox"/> Female <input type="checkbox"/> Male Disabled <input type="checkbox"/> Yes <input type="checkbox"/> No	Race <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian Other Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White	
EMPLOYMENT INFORMATION: Name of Employer Position Location- City & State Phone Supervisor Name	EMERGENCY CONTACT: Name of Relative or Friend Not Residing with you Phone Address City & State Relationship		

AGREEMENT: Please sign below and return this form in person with a valid, non-expired ID. I hereby request utility services at the above location and agree to pay for all water, sewer, and sanitation services used, delivered, or made available at the property until I notify the City to discontinue service. All services are provided subject to the Rigby City Code, as it now exists or may be amended. I acknowledge that delinquent accounts may be referred to collections and that I am responsible for all associated fees. I understand that the city provides services without warranties of any kind, and all express or implied warranties, including merchantability and fitness for a particular purpose, are disclaimed. I certify that I am the owner or tenant of the above premises and that neither I nor any member of my household has a delinquent utility account with the city. I understand that a deposit may be required from property owners prior to service being activated.

Signature of Applicant _____ **Date** _____

Signature of Co-Applicant if applicable _____ **Date** _____

OFFICE USE ONLY: I have explained the required deposit amount and billing procedures to the above applicant.

Initials of City Employee _____ **Date** _____