

**City of Granite Shoals**  
**RESIDENTIAL UTILITY SERVICE**  
**APPLICATION AND AGREEMENT**

PLEASE PRINT

Name of Applicant: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
(Responsible for all decisions regarding this account)

Name of Co-Applicant: \_\_\_\_\_  
(Spouse or other responsible adult in the household)

Service Volume Requested:       Full-time residence                       Part-time or seasonal residence

Address: \_\_\_\_\_ Requested Service Connection Date: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is this address:     Owner Occupied  
 Rental - Landlord Name & contact phone number \_\_\_\_\_  
 Other \_\_\_\_\_

Property Amenities:       Sprinkler System       Swimming Pool       Hot Tub/Spa

Name of closest relative **not living in the home**: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Have you or the co-applicant had service with the City of Granite Shoals before?     No     Yes    Acct# \_\_\_\_\_

If yes, when? \_\_\_\_\_ At what address: \_\_\_\_\_

**TERMS OF AGREEMENT**

The undersigned (hereinafter called the 'Consumer') hereby makes application for and agrees to take from the City of Granite Shoals the service or services covered by this application at the address given above, and agrees on or before the tenth (10th) day of each month or the following business day if the 10<sup>th</sup> day is a weekend or holiday, if billed monthly, to pay the City, at its Office, for such service furnished to Consumer during the period for which said billing is rendered, according to the amount thereof as established by, and in accordance with, the standard rates established by the City as from time to time for such class of service. **The City shall not be obligated under this agreement to furnish any service of a type or character not available from the existing lines or facilities of the City.** While the City attempts to establish service as soon as possible upon approval of this application, in some cases it may take up to five (5) business days to make such connection.

The Consumer agrees to permit the authorized agents of the City free access to premises of the Consumer for the purpose of inspections prior to the connection(s) of service of a type or character to determine that all service types comply with all applicable local, State, and Federal Building Codes. The Consumer agrees to permit the authorized agents of the City free access to premises for the purpose of connecting, disconnecting, inspecting, testing, reading meters, repairing or removing any property of the City, and agrees not to permit anyone other than authorized agents of the City to molest or otherwise tamper with the property of the City or to remove its seals.

The City makes reasonable provisions to insure satisfactory and continuous service, but it does not guarantee continuous service, and will not be liable for loss or damage caused by accidents or conditions which it could not have foreseen or over which it has no control.

The Consumer agrees that this application and agreement is subject to all City Ordinances and Regulations covering the services mentioned, and that such Ordinances and Regulations are a part of this agreement.

Consumer authorizes the City to request and retain a credit report, payment history, and/or service verification on any person or entity making application for utility service from the City. This information may be used when establishing the required deposit pursuant to Chapter 38 of the Code of Ordinances. The City shall report to credit service(s) relevant payment information on all persons or entities listed above when payment of the utility account remains delinquent for more than ninety (90) days. The City shall have the authority to report the payment history to other utility service providers. The City shall have the authority to authorize and direct the city attorney to file suit to collect amounts owed the City for utility services and charges that remain delinquent for a period of ninety (90) days or more. In the event of termination of service, deposits on the account will be applied to the final bill and the balance due, if any, will be billed to the Applicant. Likewise, refunds will be paid to the Applicant. All applicants, co-applicants and responsible adults are subject to provisions of this document. I (we) certify that the information provided in this document is true and correct to the best of my (our) knowledge. To see further information, visit the city's website: [www.graniteshoals.org](http://www.graniteshoals.org).

**SIGNATURES:**

\_\_\_\_\_  
Applicant – Print Name

\_\_\_\_\_  
Co-Applicant – Print Name

\_\_\_\_\_  
Applicant - Signature

\_\_\_\_\_  
Co-Applicant - Signature

\_\_\_\_\_ By signing my initials in the space provided, I authorize the City of Granite Shoals to transfer my deposit and final bill from my current account number \_\_\_\_\_ to this new account requested.

***The City of Granite Shoals adds a \$3 Voluntary Donation amount to all utility bills each month for Emergency Services including Police, Fire, and EMS. I understand it is my option to pay this amount.***

**STOP - DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY**

**WATER SERVICE**

ACCOUNT NO: \_\_\_\_\_ WATER METER NO: \_\_\_\_\_ CONNECT DATE: \_\_\_\_\_

DEPOSIT AMOUNT: \$ \_\_\_\_\_ ADDITIONAL \$ \_\_\_\_\_ CONNECT FEE \$ \_\_\_\_\_

TAP: \$ \_\_\_\_\_ STREET CUT: \$ \_\_\_\_\_ VACUUM BREAKER: \$ \_\_\_\_\_

CUSTOMER SERVICE INSPECTION: \$ \_\_\_\_\_

TRANSFER DEPOSIT       TRANSFER FINAL BILL

**GARBAGE SERVICE**

ACCOUNT NO: \_\_\_\_\_ # CARTS: \_\_\_\_\_ ROUTE #: \_\_\_\_\_ DEPOSIT AMOUNT (2months svc): \$ \_\_\_\_\_

Customer Payment History: \_\_\_\_\_ Clear      \_\_\_\_\_ Late fees      \_\_\_\_\_ Cutoffs      ADDITIONAL \$ \_\_\_\_\_

**NEW WATER LINE SERVICE APPROVAL**

YES     NO    BY: \_\_\_\_\_

PROCESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

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Nombre de Appicante : \_\_\_\_\_ Fecha de Aplicacion: \_\_\_\_\_  
(Responsable para las decisiones de esta cuenta)

Nombre del Co- Demandante: \_\_\_\_\_  
(Esposo(a) o otro adulto responsable en la casa)

Servicio Solicitado:     Completo residencia                       Parcial tiempo residencia

Direccion : \_\_\_\_\_ Fecha de Conexion: \_\_\_\_\_

Direcion Postal (se es diferente): \_\_\_\_\_

Telefono de casa: \_\_\_\_\_ Celular/de Trabajo: \_\_\_\_\_

Correo Electronico: \_\_\_\_\_

Es esta Direccion:  Ocupado de Dueno

Rentado – Nombre y numero del dueno \_\_\_\_\_

Otro \_\_\_\_\_

Servicio De Propiedad:     Sistema Sprinkler                       Piscina                       Jacuzzi

Nombre de familia cercana que no vive en el hogar: \_\_\_\_\_ Telefono: \_\_\_\_\_

Direccion: \_\_\_\_\_

Usted o el co-demandante han tenido servicio con Granite Shoals en el pasado?     No     Si    Cuenta# \_\_\_\_\_

Si, Cuando? \_\_\_\_\_ En que direccion: \_\_\_\_\_

**ACUERDO**

El no firmado (aqui llamado el ‘Consumidor’) presenta y solicita aplicar de lad ciudad de Granite Shoals el servicio(s) cubiertos por este acuerdo por las direccion anterior, y acepta el dia diez, cada mez, si se facture mensualmente, para pagar a la ciudad, en su ofician por dicho servicio para el consumidor, amueblado durante el periodo por el cual dicha facturacion se presta, de acuerdo con la cantidad del los mismos establecida por, y de acuerdo con, las tarifas de las ciudad de tiempo a tiempo establecida por tales de servicio. La ciudad no sera obligada bajo este acuerdo para amueblar cualquier servicio de un tipo de caracter no disponible de las lineas de instalacion de la ciudad. Mientras las ciudad intenta establecer el servicio al aprobar esta aplicacion, en algunos casos puede tardar cinco dias para hacer tal conexion.

El consumidor acepta permitir a los agentes autorizados de la ciudad acceso a las locales del consumidor par el proposito de las inspecciones antes de las conexion(s) de servicio de un tipo de caracter para determinar que todos los tipos de servicios cumplen con todos los estados locales, estatales aplicables y codigos de edificio federales. El consumidor acepta permitir a los agentes de las ciudad acceso a los locales para el proposito de conectar, desconectar, inspeccionar, probar, leer medidores, reparar o eliminar cualquier propiedad de la ciudad, y acepta no permisar a ninguna otra autorizacion, par molestar o de otra manera tamper con la propiedad de la ciudad o para quitar sus sellos.

La ciudad hace disposiciones razonables para asegurar un servicio satisfactorio y continuo, pero no garantiza un servicio continuo, y no sera responsable por perdidas o danos causados por accidentes o condiciones que no pdiran haber sido anteriores o superiores

El consumumidor acuerda que esta aplicacion y acuerdo estan sujetos a todas las ordenanzas y regulaciones de las ciudad que cubran los servicios mencionados y que dichas ordenanzas y regulaciones sonuna parte de este acuerdo.

El consumidor autoriza a la ciudad a solicitar y retener un informe de credito, historial de pagos y verificacion de servicio en cualquier persona que presente las solicitud de servicio publico de la ciudad. Esta informacion pued utilizarseal establecer el deposito requerido de conformidad con el capitulo 38 del codigo de ordenanzas. La ciudad informara a los serviciosde credito informacionde pago relevante sobre todas las personas o entidades cuando el pago de las cuenta de servios publicos permnanezca en el morado durante mas de 90 dias. La ciudad tendra la autoridad para informar las historia de pagos a otros proveedores de servicios. La ciudad tendra la autoridad para dirigir al abogado de la ciudad a presentar una demandapara recoger los montos adeudados a la ciudad por los servicios publicos y cargos que permanecen en mora por un periodo de 90 dias or mas. En caso de terminacion de servicio, el deposito se aplicara a la factura final y el saldo, silo hubiera, se facturara al solicitante. Los reembolsos se pagaran al solicitante. Todos los aplicantes y co-demandante estan sujetos a als disposiiciones de este documento. Yo (nosotros) certifico que las informacion en este documento es verdadera y correcta a lo mejor de me (nuestro) conocimiento. Para mas informacion visita el sitio web de la ciudad: [www.graniteshoals.org](http://www.graniteshoals.org).

**FIRMAS:**

\_\_\_\_\_   
 Applicante – Nombre de Impresion

\_\_\_\_\_   
 Co-Demandante – Nombre de Impresion

\_\_\_\_\_   
 Appicante - Firma

\_\_\_\_\_   
 Co-Demandante - Firma

\_\_\_\_\_ Al firmar mis iniciales en el espacio, autorizo a al Ciudad de Granite Shoals a transferir mi deposito y factura final de la cuent corriente \_\_\_\_\_ a esta nueva cuenta solocitada.

**La Ciudad de Granite Shoals agrega un monto de donacion voluntaria de \$3 a todas las facturas de servicios de Emergencia incluyendo Policia, Bomberos, y Ambulancia. Entiendo ques es mi opcion pagar esta cantidad.**

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