CITY OF HEALDSBURG
UTILITY SERVICE APPLICATION

The City of Healdsburg (aka "City") provides electric, water, sewer, and drainage services to residential and commercial customers within City limits. A completed application for service must be submitted, and a deposit requirement satisfied, before services start. The City's Utility Billing Policy, service rates, and FAQ's can be found @ https://www.ci.healdsburg.ca.us/172/Utility-Billing-Customer-Service.

Service Request (check one): ☐ START ☐ STOP ☐ TRANSFER

Applicants Role (check one): ☐ OWNER ☐ TENANT ☐ MANAGEMENT COMPANY

Service Address: _____

Effective Date (start/stop/transfers cannot be scheduled for weekends or holidays): _____

Mailing Address (if different from Service Address): _____

Applicant/Account Holder Name: _____

Business Name (if applicable): _____

Phone Number: _____ Email Address: _____

Social Security # or Business Tax ID #: _____

Date of Birth: ____ / ____ / _____ Driver's License # & State Issued: _____ / _____

Co-Applicant/Co-Account Holder Name: _____

Phone # (w/area code): _____ *Email Address:* _____

Social Security #: _____

Date of Birth: ____ / ____ / _____ *Driver's License # & State Issued:* _____ / _____

In consideration for receiving utility services from the City of Healdsburg for the address noted above, I/we hereby acknowledge responsibility for payment of all related utility service billings and, I/we will remain responsible for such billings until the account is closed.

Applicant Signature: _____ Date: ____ / ____ / _____

Co-Applicant Signature: _____ Date: ____ / ____ / _____

Location & Mailing Address: 401 Grove Street, Healdsburg CA 95448/Phone: (707) 431-3307 and Facsimile: (707) 431-3171
24-Hour Utility Response Hotline (707-431-7000 or Toll Free (855)755-6586

Please Email Completed Applications & Supporting Documents to: utilitybilling@ci.healdsburg.ca.us

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FOR INTERNAL USE ONLY:

Account #: _____ CSR Initials: _____ Entered Date: _____

Active Services: (check all that apply): ☐ Electric ☐ Water ☐ Sewer ☐ Drainage

Deposit* (check one):

☐ Established Credit: Prior Account/Customer Number _____

☐ Letter of Credit: Utility Name _____

☐ Paid Deposit: Amount _____ Receipt Number _____

☐ Guarantor: Customer/Owner Name _____ Account # _____

Remarks: _____
*Tape deposit receipt to back of this page or staple the Letter of Credit/Guarantor Agreement to the back of this form.