



CITY OF MANTECA

Finance Utility Department

Please return to:

City of Manteca • Finance Department • 1001 W. Center St • Manteca • CA • 95337
(209) 456-8740 • (209) 923-8930 fax • utilitystart@mantecagov.com e-mail

APPLICATION FOR ADDING / REMOVING A NAME FROM WATER/SEWER/GARBAGE SERVICES

Date: _____ Account Number: _____

Service Address: _____

Mailing Address, if different: _____

Phone Number: _____ Secondary/Work Phone Number: _____

I wish to ADD a name to my account.

Name currently on Account:

By signing below I understand that by adding a name to this account I am sharing financial responsibility as well as giving access to account information. This includes any refunds or credits on the account. If a deposit does not exist I understand that I will need to reestablish a new deposit if the person being added to this account has not established credit with the City. **State Identification or Driver's License and the last four digits of the Social Security number are required. If applying by mail, e-mail or fax you must include a copy of your State ID or Driver's License.**

First Name	MI	Last Name	Social Security #	State ID/DL	Signature

Name to be added to Account:

By signing below I understand that I am now responsible for any charges past, present, or future on this account. I understand that if I have not established credit with the City a \$100 deposit must be placed on the account. I understand it is my responsibility to notify the City when services at the above listed service address need to be cancelled. I will remain responsible for all utility services and charges until I have filed an application to stop services. If a stop service form is not received by the City all charges will continue to accumulate on the account until such notice has been received and accepted by the City. **State Identification or Driver's License and the last four digits of the Social Security number are required. If applying by mail, e-mail or fax you must include a copy of your State ID or Driver's License.**

First Name	MI	Last Name	Social Security #	State ID/DL	Signature

I wish to REMOVE a name from my account

By removing a name from my account I understand that I am now solely responsible for any charges past, present, or future on this account. I understand it is my responsibility to notify the City when services at the above listed service address need to be cancelled. I will remain responsible for all utility services and charges until I have filed an application to stop services. If a stop service form is not received by the City all charges will continue to accumulate on the account until such notice has been received and accepted by the City. **Driver's License and the last four digits of the Social Security number are required. If applying by mail, e-mail or fax you must include a copy of your State ID or Driver's License.**

First Name	MI	Last Name	Social Security #	State ID/DL	Signature

Name to be removed from Account:

By signing below I understand that I am no longer responsible for this account and that I may no longer receive any information regarding this account. I also understand that any deposits or credits that exist on the account will be returned to the person remaining on the account. **State Identification or Driver's License and the last four digits of the Social Security number are required. If applying by mail, e-mail or fax you must include a copy of your State ID or Driver's License.**

First Name	MI	Last Name	Social Security #	State ID/DL	Signature