Acco	nnt#	
$\Lambda ccc$	111117	

## CITY OF RAINIER UTILITY APPLICATION

1. Applicant Information:	
Name	Service Address
Dur. A.H.	
Billing Address	Phone
- •	ou own or rent? (check one) If renting please ask form and provide the following information:
Landlord Name Address	(
3. Employment Information:	
Applicant Employed By	
Spouse/Other Employed By	<del></del>
4. Emergency Information: In	case of emergency notify: (do not list a member of household)
Name Address	Phone
5. Garbage Information: Call	LeMay at 360-923-0111
Please note City Ordinances requi	ire that city water customers must have garbage service.
Signature of Applicant	Date Date