



# CITY OF RAINIER WATER SERVICE APPLICATION

**For Official Use Only**

Account #: \_\_\_\_\_

Date Received: \_\_\_\_\_

## APPLICANT INFORMATION (Please Print Clearly)

Applicant Name (*First and Last*): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

Email: \_\_\_\_\_ Senior Citizen (65 years or older):  Yes  No

## PROPERTY INFORMATION (Please Print Clearly)

Service Address: \_\_\_\_\_  
City State Zip

Move In Date: \_\_\_\_\_

Does the applicant rent or own the property (please check one):  \*Rent  Own

**\*If Renting:** please provide the following information and have your landlord complete the attached Authorization to Bill Tenant Form:

Landlord Name (*First and Last*): \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City State Zip

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

## Additional Information

**BILLING:** The City bills on a bi-monthly basis. Water bills will be sent out to the mailing address listed above and will be due on the 15<sup>th</sup> of the following month. If the billing due date falls on a day the city is not open, it will be due the following business day. Payment can be made in-person with a credit card, cash, or check; by mail with cash or check; over the phone and online. The former will incur a 2.5% processing fee charged by the credit card company. If you have any questions about billing or your current water bill, please contact City Hall.

**GARBAGE:** City ordinance requires that city water customers have garbage service. Please contact LeMay at (360) 923-0111 to set up your service.

**POWER:** Electricity is provided by Puget Sound Energy. Please visit [pse.com](http://pse.com) to set up an account.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Date*

## Equal Opportunity Program

*The following information is required by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note in the race/national origin of individual applicants on the basis of visual observation or surname.*

### Ethnicity

- Hispanic/Latino       Not Hispanic/Latino
- 

### Race

- American Indian/Alaskan Native  
 Asian  
 Black or African American  
 Native Hawaiian or Pacific Islander  
 While
- 

### Sex

- Male  
 Female
- 

*This is an Equal Opportunity Program. Discrimination is prohibited by Federal law, Complaints of discrimination may be filed with the Administrator, USDA, Rural Development, Washington, D.C. 20250-0700.*

*Este programa es de oportunidad igualada. Discriminacion es porhibido por la ley Federal. Quejas de discriminacion pueden ser registradas con el Adminstrador, USDA, Rural Development, Washington, D.C. 20250-0700*

# CITY OF RAINIER

## Water Service

### New Account Activation

Activation Date: \_\_\_\_\_

Name: \_\_\_\_\_

Owner Name (if different): \_\_\_\_\_

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

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

Home: Occupied \_\_\_\_\_ Vacant \_\_\_\_\_

If vacant, date of home to be occupied: \_\_\_\_\_

### ***For office use only***

Meter Reading: \_\_\_\_\_ Date Checked: \_\_\_\_\_

Checked By: \_\_\_\_\_

Turn Off: \_\_\_\_\_ Turn On: \_\_\_\_\_ Account#: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Account Finalization

Finalization Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

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

Forwarding Phone: \_\_\_\_\_



**CITY OF RAINIER**  
***AUTHORIZATION TO BILL TENANT***

I, \_\_\_\_\_, certify that I am the owner or duly authorized agent of the property located at \_\_\_\_\_, Rainier, WA 98576.

I hereby authorize the City of Rainier to bill all my tenant(s) directly for water service subject to the following terms and conditions:

In accordance with applicable City ordinances, I agree to remain jointly and severally liable for any past due water bills unpaid by my tenants. I further understand that it shall be my responsibility to notify the City of Rainier Utility Department of any change in tenancy or ownership. Such notification shall not waive any rights to collection granted herein. I further understand that water to the property may be discontinued when any amount due becomes delinquent, and that service to the property may not be restored until all charges due have been paid in-full, by me or my tenant, regardless of any change in tenancy or ownership, except as provided otherwise by ordinances.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Account No. \_\_\_\_\_

\_\_\_\_\_  
Owner/Authorized Agent Signature

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Telephone Number

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

\_\_\_\_\_  
City Staff