

# LOS OSOS COMMUNITY SERVICES DISTRICT

2122 9<sup>TH</sup> STREET P. O. BOX 6064 LOS OSOS, CA 93412  
(805) 528-9370 FAX (805) 528-9377

## WATER SERVICE APPLICATION

[APPLICATION MUST BE SIGNED BY TENANT/RENTER/AGENT\* OR PROPERTY OWNER\*]

FOR OFFICE USE ONLY				
LOCATION #	ROUTE #	CUSTOMER #		
METER #	BEGIN READ	SIZE	SEWER** YES	NO

DATE OF REQUEST: \_\_\_\_\_ SERVICE START DATE: \_\_\_\_\_

SERVICE ADDRESS \_\_\_\_\_ RENTAL \_\_\_\_\_ OWNER'S RESIDENCE \_\_\_\_\_

TENANT/RENTER/AGENT*			OWNER OF PROPERTY*		
NAME:			NAME:		
ADDRESS:			ADDRESS:		
CITY:	ST:	ZIP:	CITY:	ST:	ZIP:
HOME PHONE:			HOME PHONE:		
DRIVER'S LICENSE #:			FAX:		
CELL PHONE:			CELL PHONE:		
WORK PHONE:			WORK PHONE:		

\* Proof of Authorization may be required by District

I agree to abide by all rules, regulations, ordinances and resolutions of the Los Osos Community Services District regarding the water services to the above referenced service address.

The owner of the property which is furnished service is the customer and shall be responsible for the payment of all rates, charges, fees and penalties regarding furnished services. Unpaid obligations shall lead to a delinquency and termination of service to the property furnished services. Further, unpaid obligations shall run with the land and create a lien on the property that is furnished services.

- The property owner (at the above address); or
- The tenant/renter/agent (at the above address).

Signatory below acknowledges with his/her signature that he/she has read, understands and agrees to the above.

**A NON-REFUNDABLE ACTIVATION FEE OF \$50.00 IS DUE WITH THIS APPLICATION**

**SIGNATURE**

**DATE**

\_\_\_\_\_  
Tenant/Renter/Agent or Property Owner (circle one)

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