

Sample Only-Not For Public Use

City of Newport  
200 S. Washington Avenue  
Newport, WA 99156  
(509) 447-5611  
(509) 447-2259 Fax

APPLICATION FOR WATER/SEWER SERVICE

ACCOUNT #: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME OF PROPERTY OWNER: \_\_\_\_\_

OWNER'S MAILING ADDRESS: \_\_\_\_\_

OWNER'S PHONE NUMBER: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

IS PROPERTY OWNER OCCUPIED? \_\_\_\_\_ YES \_\_\_\_\_ NO

IF NO, RENTER'S NAME: \_\_\_\_\_

RENTER'S MAILING ADDRESS: \_\_\_\_\_

RENTER'S PHONE NUMBER: \_\_\_\_\_

WOULD YOU LIKE THE RENTER TO BE DUPLICATE BILLED? \_\_\_ YES \_\_\_ NO

ESTIMATED DATE OF OCCUPANCY: \_\_\_\_\_

RESIDENTIAL: \_\_\_\_\_ COMMERCIAL: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date