



UTILITY SERVICES APPLICATION

City of Hughson
 7018 Pine St. • PO BOX 9
 Hughson, CA 95326
 209-883-4054
 ub@hughson.org

- Proof of Ownership and a U.S issued ID **REQUIRED**.
- A utility service deposit of \$80.00 will be required for all new or previously delinquent utility service accounts. A deposit account credit will be processed after twelve (12) consecutive timely payments.
- Utility bills are mailed at the beginning of each month and due the last business day of said month. The utility service bill includes a flat rate for each water, sewer, and garbage service. In addition to the flat service rates, a water usage fee will be charged per 1,000 gallons of metered water used. A payment is considered late and subject to a 10% penalty, if not paid and in our offices by billing due date. Any bill in a delinquent status that requires a City imposed discontinuance of service, will be subject to a full balance payment, in addition to a non-refundable reconnection fee in order for utility services to be reinstated.

Start Service Date	Service Address	Utilities		
		<input type="checkbox"/> Water	<input type="checkbox"/> Sewer	<input type="checkbox"/> Garbage
Property Owner Information				
Property Owner Name		Telephone No.	Social Security No.	
Property Owner Mailing Address (If different from above)			Driver's License No.	
Email Address				
Tenant Information				
It is the property owner's responsibility to stop services when he/she or a tenant moves out. Keep in mind a tenant will not be allowed to make changes to the account or stop services.				
Tenant Name			Telephone Number	
Tenant Mailing Address				
Note:				

I, _____, hereby declare that I am the property owner of the referenced address, and that I request utility services at this address, and agree to pay for the rates, charges, and fees for these services as established by the City. I have read and understand the provisions of the City of Hughson Municipal Code Sections 13.04.810 & 13.08.510, that I shall be responsible for all rates, charges and fees for service relating to this application from the referenced start date until the date that I have notified the City of Hughson Utility Billing Department of the discontinuance of these services.

Property Owner Signature: _____ Date: _____

Office Use Only		
Deposit	Account Number	Parcel