



534 Washington Street
Montpelier, ID 83254
Phone: 208-847-0824
Fax: 208-847-3867

Application for Utility Service

Date Service is to Begin: _____

Service Address: _____

Applicant's Name (Print) _____

Name, Address, Phone # of Employer: _____

Reference Person's Name, Address, Phone # and Relationship:

Name, Address & Phone # of Homeowner: _____

I hereby certify that I am the owner () or tenant() of the above described property and that I do hereby accept and will comply with all rules, ordinances and regulations which may be prescribed by the City relating to water and sewer service and distribution.

Signature Required: _____