



CITY OF MONTPELIER

830 Washington St., Montpelier, ID, 83254

Phone: 208-847-0824 | Fax: 208-847-3867 | Email: montcity@dcdi.net

Application for Utility Service

Date Service is to Begin: _____

Service Address: _____

Applicant's Name (Print) _____

Applicant's Phone # _____

Name, Address, Phone # of Employer: _____

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

Name, Address & Phone # of Homeowner and billing address:

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: _____