



# City of Washburn

PO Box 467, Washburn, ND 58577  
(701) 462-8558 | Email: cityofwashburn@westriv.com

Name Requested on Utility Account: \_\_\_\_\_

Service Address (Physical address of house): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Emailed Bill  Yes  No

Employer: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

CLOSING DATE or MOVE IN DATE or DATE WATER TURNED ON (Whichever is first): \_\_\_\_\_

Are you a NEW resident to Washburn, ND?  Yes  No

## Property Information:

This property is:  Purchased  Rented

If renting, the following information is required to set up your account:

Landlord's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Landlord's Mailing Address: \_\_\_\_\_

Landlord/Owner Signature (or copy of signed lease): \_\_\_\_\_

Are you disconnecting services at another address?  Yes  No

Address to Discontinue: \_\_\_\_\_ Disconnect Date: \_\_\_\_\_

Is this a newly constructed home in need of a garbage container?  Yes  No

The undersigned is responsible for all utilities and accepts and agrees to abide by all provisions, conditions, requirements and regulations as outlined in the ordinances of the City of Washburn regarding utility service and collection of same, as such ordinances now exist and as from time to time are amended.

The undersigned further agrees that this agreement shall remain in effect and shall be binding until termination of service is provided in writing.

Signature: \_\_\_\_\_

### CITY OFFICE USE ONLY

Date Received: \_\_\_\_\_ Security Deposit Received:  Yes  N/A

ID Type: \_\_\_\_\_ Name on ID: \_\_\_\_\_

ID State: \_\_\_\_\_ ID Number: \_\_\_\_\_ ID Expiration: \_\_\_\_\_

Add to Utility Billing

Notify Circle Sanitation