

Konocti County Water District

15844 35th Ave.

Clearlake, CA 95422

Phone 707-994-2561

Fax 707-994-1107

Date: _____

Account Number: _____

**New Owner
Account Application & Informational Sheet**

I, _____, am requesting that the Konocti County Water District furnish water to the property located at, _____, Clearlake, CA. 95422.

I understand that in return I agree to abide by all Konocti County Water District rules and regulations. I further understand that I am responsible for all applicable charges and fees.

I understand that if I rent my property located at the above address, I am responsible for all bills not paid by my tenants.

Signature

Date

ACCOUNT INFORMATION

Owner's Name: _____

Mailing Address: _____

City, State, Zip: _____

Phone # 1: _____

Copy of Driver's License: _____

Copy of Title/ Deed _____

For Office Use Only

<u>Check One</u>	<u>Fees Paid</u>	<u>Amt. Due</u>	<u>Date Paid</u>
Name Change Fee	\$10.00	_____	_____
Transfer Fee	\$60.00	_____	_____
Reconnect Fee	\$80.00	_____	_____

***** PLEASE PROVIDE PROOF OF OWNERSHIP *****

May 2018