

GRIZZLY LAKE COMMUNITY SERVICES DISTRICT

119 Delleker Road, Portola, CA 96122

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COMMERCIAL

APPLICATION FOR NEW WATER AND/OR SEWER SERVICE

DATE _____ Service Requested. WATER SEWER

Property Address:		APN: _____		
Property Owner:		Phone: ())		
		Alt Phone: ())		
Mailing Address:	Street	City	State	Zip
Billing Address:				
Date Service to Start:	<div style="border: 2px solid black; padding: 10px;"> <p>New Service Application and Fees Valid for a Period of Three (3) Years from Date of Issue Per Ordinance 03-7020.52</p> </div>			
Water Hook Up Commercial 1" \$7,970				
Commercial Sewer Hook Up \$7,970				
Inspection Fee -Water (\$100.00)				
Inspection Fee-Sewer (\$100.00)				
*see exhibit A for cut & patch fees				
Total Amount Due:				

Applicant(s) accepts responsibility for payment for the service(s) indicated above at the rates and charges applicable as contained in the Grizzly Lake Community Services District Ordinances and Resolutions, a copy of which is available for examination at the District office. Applicant also agrees to conform to and abide by the District's Ordinances, Resolutions, rules and regulations. Applicant(s) understands that bills paid after the **20th day** of each month will be subject to a **10% late charge on all past due amounts** until paid in full. All unpaid rates and late fees may be collected by suit. The defendant shall pay all collection costs and reasonable attorney fees to collect delinquent charges and fees. Applicants(s) agree to notify the District prior to moving/ending service and be responsible for all charges until the District is so notified. I authorize G.L.C.S.D. to verify any information I provide, such as property ownership, employment, credit check, etc. I agree to ensure access is available to the service box/meter(s) at all times.

SIGNATURE: _____

DATE: _____

SIGNATURE: _____

DATE: _____

GRIZZLY LAKE COMMUNITY SERVICES DISTRICT IS AN EQUAL OPPORTUNITY PROVIDER

for Office Use Only

Date Payment Received: _____ Paid By: _____ Check# _____

Payment Received By
District Representative: _____ Title: _____

FEDERAL COMPLIANCE INFORMATION

The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required by Federal Law to note the race/national origin of individual applicants on the basis of visual observation or surname.

Ethnicity:

Hispanic or Latino Not Hispanic or Latino

Race/National Origin of Applicant (Please Check One):

American Indian/Alaskan Native Asian Black or African American

Native Hawaiian or Other Pacific Islander White Other

Gender:

Male Female