



City of Glendora
Phone: (626) 914-8239
Address: 116 E. Foothill Blvd. Glendora, CA 91741
Email: WaterBilling@CityofGlendora.org

WATER ACCOUNT OPENING REQUEST FORM

Customer Name: _____ Owner Tenant Other
Service Address: _____ City: _____ State: ____ Zip code: _____
Mailing Address: _____ City: _____ State: ____ Zip code: _____
Social Security Number: _____ Driver's License #: _____ Exp Date: _____
Phone Number: _____ Alternative Phone Number: _____
Email Address: _____ Opt in for email? Yes No
Requested Service Start Date: _____

ALTERNATIVE CONTACT:

I authorize the following party to have access to my account:

Name: _____ Phone: _____

Email Address: _____ Relation to Customer: _____

- | |
|--|
| <input type="checkbox"/> Information Purposes only
<input type="checkbox"/> To Add/Change Information |
|--|

I agree to use the water service and pay therefore in accordance with the rates, rules and regulations legally in effect by the City of Glendora. I declare under penalty of perjury under the laws of the State of California that the information I have provided is true and accurate. I acknowledge that the provision of false information is grounds for termination of service. For more information, please visit www.cityofglendora.org/waterbilling.

Applicant Signature: _____

Name: _____

Date: _____

FOR OWNERS: Would you like to authorize the creation of a landlord trust agreement? Yes No

Instructions:

For Owners: Email this form (*email address above*) and attach proof of ownership and ID.

For Tenants: Email this form with ID and send in the \$200 deposit via mail or night drop boxes at the City Hall.

FOR OFFICIAL/STAFF USE ONLY:

ID Verified: _____ Ownership Check: ____ Deposit Amount: \$ _____ Form of payment: Cash Check Card

Previous Residence Address: _____

New Account Number: _____

Effective/ Start Date: _____