



Customer Service Center 500 N Pearl Street, Centralia, WA 98531
Phone: (360) 330-7657 Fax: (360) 330-7593
Email: csc@cityofcentralia.com

OWNER APPLICATION FOR UTILITY SERVICE

A COPY OF CURRENT PHOTO ID IS REQUIRED

Service Address _____ Effective Date _____ ☐ Check if Residential ☐ Check if Commercial

Owner Name _____ Spouse or Co-Tenant Name _____

Email Address: _____ Preferred Method of Contact: ☐ Phone ☐ Email ☐ Text

Mailing Address _____ City _____ State _____ Zip _____

Owner: _____
Driver's License/State ID # _____ SSN or UBI or FEIN # _____ Date of Birth _____ Phone Number _____

Spouse or
Co-Tenant: _____
Driver's License/State ID # _____ SSN or UBI or FEIN # _____ Date of Birth _____ Phone Number _____

Owner: _____
Employer Name _____ Employer Phone Number _____

Spouse or
Co-Tenant: _____
Employer Name _____ Employer Phone Number _____

☐ I hereby certify that I am the legal property owner and have the authority to establish utility services at the above service address location.

☐ I hereby make application for utility services from the City of Centralia, subject to all of the provisions of City ordinances now existing or hereafter adopted, copies of which are available for inspection during normal business hours at City Hall and agree to pay all charges as provided for therein and that the obligations of the parties are covered thereby. This application shall automatically grant the City of Centralia the right to access the property for performance of the City's services.

☐ I understand the City of Centralia shall have a lien against the property in accordance with RCW 35.21 and RCW 35.67 of charges which shall be the obligation of the owner of the property, its heirs, successors and assigns, until the sum is paid in full. The City may enforce the lien by shutting off and not restoring electricity, water and/or sewer until all delinquent and unpaid charges are paid in full. The City of Centralia may also employ other legal remedies such as collection agencies, small claims court and superior court to collect the unpaid amount from the property owner.

Owner Signature _____ Date _____

Spouse or Co-Tenant Signature _____ Date _____

Confidentiality Note: This document contains information belonging to the City of Centralia, which is confidential and/or legally privileged. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this information is strictly prohibited. If you have received this in error, please immediately notify us by telephone to arrange for return of the document to us.

Office Use Only

☐ Account Established ☐ Ownership Verified Date: _____ Initials: _____

Escrow/PATS: _____ Recording # of Real Estate Contract: _____