For Office Use Only • Residential

Date	No. of Pages
To	From Eden
Co./Dept.	Co. **UTILITY BILLING**
Phone #	Phone # **(805) 385-7816**
Fax #	Fax # **(805) 385-7865**

CUSTOMER #_____

LOCATION #_____

PROCCESSED BY: _____

DEPARTMENT OF BILLING & LICENSING
WATER- SEWER – REFUSE
214 South C St., Oxnard, CA 93030
Phone 805-385-7816 • Fax (805) 385-7865
www.cityofoxnard.org Email: c2gutilities@oxnard.org

CITY OF OXNARD CALIFORNIA

ACCEPTANCE OF RESPONSIBILITY FOR CITY UTILITY SERVICES

Please provide the following Information:

Type of Request: ❑ Connect ❑ Disconnect
❑ Owner
❑ Tenant
❑ Trustee

Service Address _____ _____

Type of Service: ❑ Water ❑ Sewer ❑ Trash _____

Initiation Date _____ Deposit Amount $_____

Applicant's Name(s): _____

Mailing Address *(if different)*: _____

Phone Number: _____ Alternate Phone #: _____

Driver's License or ID #: _____ Date of Birth: _____

Social Security # or Federal ID #: _____ # of Occupants: _____

Employer's Name: _____

Occupation:_____ Bus Phone #: _____

Spouse's Name: _____

Employer's Name:_____ Occupation: _____

Previous Address: _____

Reference: _____ Phone #: _____

By signing below, the customer agrees either by telephone or in person to be responsible for payment for utility services provided by the City of Oxnard (City). The customer shall not voluntarily or by operation of law assign, transfer, sublet, mortgage, or otherwise transfer or encumber all or any part of such customer's agreement with the City. If the customer abandons or vacates the premises receiving such utility services, without notifying the City in writing, the customer will be liable for payment for all future utility services charges.

In any action or proceeding arising out of this agreement, the prevailing party shall be entitled to reasonable attorneys' fees and costs, including fees and costs of the Oxnard City Attorney Office.

The water meter is the property of the City and only City employees may turn it on/off.

_____

Signature Print Name Date