WESTWOOD COMMUNITY SERVICES DISTRICT (WCSD) APPLICATION FOR WATER/SEWER SERVICE

P.O. Box 319 Westwood, CA 96137 530-256-3211 Fax 530-256-3212

APPLICATIONS BY TENANTS OR PERSONS OTHER THAN THE PROPERTY OWNER SHALL NOT BE PERMITTED EXCEPT AS OTHERWISE REQUIRED BY GOVERNMENT CODE SECTION 60370, ET SEQ. AND PUBLIC UTILITIES CODE SECTIONS 777 ET SEQ., 10001, ET SEQ. AND 16461, ET SEQ.

(1) APPLICANT (PROPERTY OWNER AND EACH CO-OWNER):

NAME (PROPERTY OWNER)		E	F OF PROPERTY OWNERSHIP EED AX BILL	
IG ADDRESS		T ADDRESS		
		DE	HONE #	
NAME (PROPERTY CO-OWNER)		E	F OF PROPERTY OWNERSHIP EED AX BILL	
IG ADDRESS		T ADDRESS		
		DE	HONE #	
(2) DATE OF A	PPLICATION:			
(3) PLACE OF A	APPLICATION:			

(4)	LOCATION OF PROPERTY/PREMISES TO BE SERVED:			
(5)	REQUIRED SERVICE DATE:			
(6)	NAME & ADDRESS TO WHICH BILLS ARE TO BE MAILED IF OTHER THAN PROPERTY OWNER ADDRESS IDENTIFED IN SECTION 1, ABOVE:			
(7) PREN	HAS DISTRICT SUPPLIED PRIOR SERVICE TO THE PROPERTY/ IISES?			
(8)	PURPOSE FOR WHICH SERVICE IS TO BE USED:			
	RESIDENTIAL (DOMESTIC) SERVICE			
	COMMERCIAL SERVICE			
	MUNICIPAL OR PUBLIC USE PUBLIC FIRE PROTECTION			
	TEMPORARY SERVICE (IDENTIFY			
	RESIDENTIAL/COMMERCIAL)			
(9)	SIZE OF SERVICE:			
(10)	DO OTHER WATER SOURCES EXIST ON THE PROPERTY/PREMISES? IF SO, PLEASE DESCRIBE:			

APPLICANT(S)/OWNER(S) UNDERSTAND AND AGREE TO EACH OF THE FOLLOWING TERMS AND CONDITIONS OF SERVICE:

(1) THE WATER/SEWER SERVICE TO BE SUPPLIED BY THE DISTRICT AT THE PROPERTY/PREMISES IDENTIFIED IN SECTION 4, ABOVE, IF ANY, SHALL BE SUBJECT TO, AND CONDITIONED UPON, APPLICANT(S)'/OWNER(S)' COMPLIANCE WITH ALL DISTRICT ORDINANCES, RESOLUTIONS, RULES AND REGULATIONS REGARDING THE PROVISION OF WATER AND SEWER SERVICES

WITHIN THE DISTRICT INCLUDING, BUT NOT LIMITED TO, THOSE RELATING TO RATES, SERVICE AND SUPPLY, BILLING AND PAYMENT, AND DISCONTINUATION AND RE-ESTABLISHMENT OF SERVICE. IN ANY LEGAL ACTION BROUGHT BY THE DISTRICT OR ITS AGENTS TO ENFORCE APPLICANT(S)'/OWNER(S)' COMPLIANCE REFERENCED ABOVE, IN WHICH THE DISTRICT REQUESTS THE RECOVERY OF ATTORNEYS' FEES, THE PREVAILING PARTY SHALL BE AWARDED REASONABLE ATTORNEYS' FEES AND COSTS, IN ADDITION TO ALL OTHER DAMAGES AUTHORIZED BY LAW, AND SHALL BE ENTITLED TO ITS REASONABLE ATTORNEYS' FEES AND COSTS INCURRED IN ANY POST-JUDGMENT PROCEEDINGS TO COLLECT OR ENFORCE ANY JUDGMENT, AND IN ANY APPEAL.

- (2) THIS APPLICATION IS MERELY A WRITTEN REQUEST FOR SERVICE. WHERE EXTENSION OF DISTRICT MAINS IS REQUIRED TO PROVIDE SERVICE, APPLICANT/OWNER SHALL BE REQUIRED TO PAY THE COST OF SUCH EXTENSION SUBJECT TO THE PROVISIONS OF SECTION 24, OF WCSD ORDINANCE NO. 2. APPLICANT(S)/OWNER(S) FURTHER AGREE THAT THE EXECUTION OF A CONTRACT, RATHER THAN AN APPLICATION FOR SERVICE, MAY BE REQUIRED BY THE DISTRICT IN ACCORDANCE WITH THE DISTRICT'S ORDINANCES, RESOLUTIONS, RULES AND REGULATIONS.
- (3) EACH APPLICANT/OWNER MAKING A SINGLE APPLICATION FOR SERVICE, SHALL BE JOINTLY AND SEVERALLY LIABLE TO THE DISTRICT FOR THE PAYMENT OF SUCH SERVICE, AND THE DISTRICT SHALL ONLY BE OBLIGATED TO SEND A SINGLE, PERIODIC BILL.
- (4) IF, AS INDICATED IN SECTION 6, ABOVE, THE ADDRESS TO WHICH BILLS ARE TO BE MAILED DIFFERS THAN THE PROPERTY OWNERS' ADDRESS(ES) IDENTIFED IN SECTION 1, ABOVE, OWNER/APPLICANT NEVERTHELESS REMAINS JOINTLY AND SEVERALLY RESPONSIBLE FOR COMPLETE SATISFACTION OF ANY OUTSTANDING AMOUNTS OWED FOR SAID SERVICE.

(SIGNATURE OF APPLICANT/OWNER)
/DDINIT NIAME)
(PRINT NAME)
(SIGNATURE OF APPLICANT/CO-OWNER)

(PRINT NAME)
The following information is requested by the Federal Government in order to monitor the District's compliance with federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but you are encouraged to do so. This information will not be used in evaluating your application nor will it be used to discriminate against you in any way. However, if you choose not to furnish it, the District is required to note the race/national origin of individual applicants on the basis of visual observation or surname.
Race/National Origin of Applicant (Property Owner) – (Check One):
White, Non-Hispanic Black, Non-Hispanic
Hispanic American Indian or Alaskan Native
Asian or Pacific Islander
This is an Equal Opportunity Program. Discrimination is prohibited by federal law. Complaints of discrimination may be filed with the USDA, Director, Office of Civil Rights, Washington, D.C. 20250-9410.