

# GOLDEN HILLS COMMUNITY SERVICES DISTRICT

Mail: PO Box 637, Tehachapi, CA 93581-0637

Phone: 661-822-3064

Physical Address **no** mail: 21415 Reeves Street, Tehachapi, CA 93561

Fax: 661-822-8284

## APPLICATION FOR SERVICE - MULTI-FAMILY OR COMMERCIAL

PLEASE PRINT ALL INFORMATION

Check one:  OWNER (proof of ownership)

TENANT (owner authorization – see \* below )

REALTOR/PROPERTY MGR/OWNER'S AGENT (agency agreement or equivalent)

CONTRACTOR/BUILDER (supportive document)

DEFAULT CUSTOMER PER CA GOVERNMENT CODE 60370

Circle one: COMMERCIAL / MULTI-FAMILY Number of units \_\_\_\_\_

Name \_\_\_\_\_ Service Start Date \_\_\_\_\_

Service Address \_\_\_\_\_ Tract \_\_\_\_\_ Lot \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Owner's Name \_\_\_\_\_ Owner's Phone \_\_\_\_\_

Owner's Mailing Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

"I hereby apply to the Golden Hills CSD for water in accordance with all Ordinances, Resolutions, and rate schedules now or hereafter in effect. I agree to be individually liable of all charges accruing for this service without notice or demand. I hereby waive any claim against the District arising out of interruption of service for any reason, with or without notice and I understand that the owner of the property shall be responsible for all water charges, damages and/or penalties associated with the property, including, but not limited to, all water charges, damages and/or penalties accrued by tenants to the property."

\* Signed Owner/Agent Authorization \_\_\_\_\_ Date \_\_\_\_\_

Signed Customer \_\_\_\_\_ Date \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

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### For Office Use Only

Account Number \_\_\_\_\_

Date Service Established \_\_\_\_\_ Meter Read \_\_\_\_\_

Meter Size \_\_\_\_\_ Installation Date \_\_\_\_\_ Check/Receipt # \_\_\_\_\_

Deposit \_\_\_\_\_ (ca/ck) Date Paid \_\_\_\_\_ Check/Receipt # \_\_\_\_\_

App Fee \_\_\_\_\_ (ca/ck/cc) Date Paid \_\_\_\_\_ Check/Receipt # \_\_\_\_\_

*(Please pay deposit and application fee with separate checks)*

METER SIZE	MINIMUM REQUIRED DEPOSIT
¾"	\$175.00
1"	\$275.00
1½"	\$375.00
2"	\$475.00
3"	\$675.00
4"	\$875.00
6"	\$1,275.00