

DIABLO WATER DISTRICT
WATER SERVICE RETENTION AGREEMENT
For Bank owned properties

Please establish water service for me at _____,
Oakley. I agree to retain the water service in my name for a minimum of 60 days or
until the property title transfers to the new owner.

Billing information for the above address:

Billing Name: _____

Company Name: _____

Contact Name: _____

Telephone Number: _____

Billing Address: _____

Date Service is to begin: _____
(Monday –Friday, non holidays only)

Check one for \$100 Deposit payment method

_____ Cash _____ Cashiers Check _____ Visa or Master Card

- **If you are choosing to pay by credit card, please do NOT write your credit card information on this form. We will contact you within 24 hours of receipt of this application to obtain your credit card information.**

**Deposit to be refunded to: _____

Fax to Diablo Water District at 925-625-0814 or mail to P. O. Box 127, Oakley, CA 94561. Water service will not commence until the District receives the necessary deposit and return of this completed form.

By signing this form, applicant agrees that in partial consideration of Diablo Water District “DWD” agreeing to provide water service to applicant, applicant agrees to hold DWD harmless from all claims or lawsuits related to said water service, other than which may be caused by the sole negligence of DWD, and indemnify DWD for any such claims or lawsuits including, but not limited to attorney’s fees and court costs.

Applicant Signature

/ Print Name

Date: _____