

PLEASE PRINT OR TYPE

Diablo Water District Application for Water Service For Businesses/Property Managers

**** TO STOP SERVICE – PLEASE COMPLETE “REQUEST TO CLOSE WATER ACCOUNT” FORM****

****FIELDS IN RED MUST BE COMPLETE****

SERVICE ADDRESS: _____ (Office Use Only)
ACCT. NO. _____

Requested Start Date: _____ We are unable to back date start dates. Every effort will be made to begin services on your requested start date (Monday – Friday, non-holidays); however due to high volumes some may be held until the following business date.

Primary Applicant:

Billing Name: _____

Mailing Address: _____

(if different from Service Address) _____

Tax ID No.: _____

Main Phone No.: _____

Email Address: _____

Contact Name: _____

Direct Phone No: _____

Has this company ever had service with Diablo Water District? _____ If yes, where?: _____

- Check all that apply:**
- Business
 - Property Management
 - Irrigation
 - Fire Service

Deposit: \$100.00 – This will be added to your first water bill. After receiving 12 months of billing with no more than one final notice, the \$100.00 will be applied back to your account on the 13th month.

Call Out Charge for New Sign Up After Hours: _____
Applicant’s Signature

About our District: Please visit our website www.diablowater.org for current rates. We bill on a monthly basis. We use Chloramines in the water to disinfect which is a combination of chlorine and ammonia. There is fluoride in the water and the water is safe to use and drink. If you have a fish aquarium, you need to use a water treatment that you can find at any local pet store. If anyone in the home lives on a kidney dialysis machine, they must contact their physician for the water settings for the machine. We recommend that your outside watering should be no more than five (5) minutes at any one time.

Release of Liability: I request that Diablo Water District turn on water at the above service address regardless of anyone being at the premises. I realize that if all water-using appliances are not completely closed, or if there are any leaks, the premises may suffer water damage. I hereby accept full responsibility for any such damage and agree to hold Diablo Water District harmless if any damage should occur.

Signature: _____ **Date:** _____

Please return to 87 Carol Lane, Oakley, CA 94561 or Fax: 925-625-0814

**** FOR SAME DAY SERVICE – WE MUST RECEIVE FAX BY 12 P.M. MONDAY THROUGH FRIDAY ONLY****