



City of Blue Lake

WATER AND SEWER APPLICATION

P.O. Box 458, Blue Lake, CA 95525

Phone: 707-668-5655 Fax: 707-668-5916 Email: cityclerk@bluelake.ca.gov

www.bluelake.ca.gov

Account Information				
Account # (Assigned by City):		Service Date:		
Service Address:			Apt./Unit No:	
Mailing Address:		Landlord's Name:	Landlord's Phone No:	

Residential Application Information (Please Print)				
First Name:		Last Name:		D.L.# & State:
Phone No.:		Alt. No:	Email:	
Additional Acct. Name:				Phone No.:
Do you plan on operating a home-based business at this residence? Yes: <input type="checkbox"/> No: <input type="checkbox"/> If Yes , a Home Occupation Permit must be completed.				
Will a dog(s) reside at this address? Yes: <input type="checkbox"/> No: <input type="checkbox"/> If Yes , please complete a Dog License Application				

Business/Commercial Application Information (Please Print)			
<i>*A Blue Lake Business License is Required Prior to Service</i>			
Business Name (As it should appear on billing):			
Name of Owner(s):		Business Phone No:	
Emergency Contact Person:		After Hours Emergency Phone No.:	
Business Contact Email Address:		City of Blue Lake Business Lic. No.:	

Agreement: *The undersigned agrees to be fully liable to the City of Blue Lake for all amounts due and owing for water/sewer services provided pursuant to this request, including late fees and penalties, attorney's fees, and all other costs associated with collection. The City reserves the right to terminate services in the event of non-payment. The undersigned further agrees to comply with all ordinances and regulations pertaining to water/sewer services and will provide notification to the City when service is to be discontinued.*

Signature of Applicant: _____ **Date:** _____

Office Use Only							
Deposit Amt:	\$	Date Paid:		Check#/Cash/C.C.:		Initial:	
Admin Fee:	\$	Date Paid:		Check#/Cash/C.C.:		Initial:	