



City of Washburn

PO Box 467, Washburn, ND 58577
(701) 462-8558 | Email: cityofwashburn@westriv.com

Name Requested on Utility Account: _____

Service Address (Physical address of house): _____

Mailing Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____ Emailed Bill Yes No

Employer: _____ Work Phone Number: _____

CLOSING DATE or MOVE IN DATE or DATE WATER TURNED ON (Whichever is first): _____

Are you a NEW resident to Washburn, ND? Yes No

Property Information:

This property is: Purchased Rented

If renting, the following information is required to set up your account:

Landlord's Name: _____ Phone: _____

Landlord's Mailing Address: _____

Landlord/Owner Signature (or copy of signed lease): _____

Are you disconnecting services at another address? Yes No

Address to Discontinue: _____ Disconnect Date: _____

Is this a newly constructed home in need of a garbage container? Yes No

The undersigned is responsible for all utilities and accepts and agrees to abide by all provisions, conditions, requirements and regulations as outlined in the ordinances of the City of Washburn regarding utility service and collection of same, as such ordinances now exist and as from time to time are amended.

The undersigned further agrees that this agreement shall remain in effect and shall be binding until termination of service is provided in writing.

CITY OFFICE USE ONLY

Signature: _____

Date Received: _____ Security Deposit Received: Yes N/A

ID Type: _____ Name on ID: _____

ID State: _____ ID Number: _____ ID Expiration: _____

Add to Utility Billing

Notify Circle Sanitation