

S.S.N./FEIN: \_\_\_\_\_ ESCROW NO.: \_\_\_\_\_

**City of Imperial**  
**APPLICATION FOR SERVICE**

ACCOUNT NAME: \_\_\_\_\_ ACCOUNT NO.: \_\_\_\_\_

LOCATION OF SERVICE: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

I hereby agree to pay for all charges for city services to the above premises, as established by ordinances and resolutions adopted from time to time by the City of Imperial.

DATE: \_\_\_\_\_ APPLICANT: \_\_\_\_\_

**OWNERS / REALTOR / PROPERTY MANAGER** *Owner / Tenant / Realtor / Property Manager*

I hereby authorize the above-named tenant to receive city services on the above property, and guarantee the payment of all charges, under the provisions of ordinances and resolutions of the City of Imperial, as adopted or amended from time to time.

DEPOSIT: \$ \_\_\_\_\_ OWNER: \_\_\_\_\_

DATE: \_\_\_\_\_ MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_