



City of Signal Hill Water Service Application

2175 Cherry Avenue Signal Hill, CA 90755-3799

RESIDENTIAL CUSTOMERS

NAME 1		SIGNATURE OF RESPONSIBLE PARTY	
NAME 2		BILLING ADDRESS	
SERVICE ADDRESS		DAY PHONE #	CELL PHONE #
PURCHASE DATE (OWNER)	MOVE IN DATE (RENTER)	EMERGENCY CONTACT	EMERGENCY PHONE #
WOULD YOU LIKE TO SIGN UP FOR PAPERLESS STMT?	<input type="checkbox"/> YES <input type="checkbox"/> NO	EMAIL ADDRESS	
WOULD YOU LIKE TO SIGN UP FOR AUTO ACH DRAFT?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF SIGNING UP FOR ACH DRAFT, PLEASE PROVIDE A CANCELLED CHECK. ACH WILL DRAFT 5 DAYS BEFORE THE 20TH OF THE MONTH.	
IDENTIFICATION VERIFICATION		DEPOSIT AMOUNT	RECEIPT #

COMMERCIAL CUSTOMERS

BUSINESS NAME		SIGNATURE OF RESPONSIBLE PARTY	
OWNER'S NAME		BILLING ADDRESS	
SERVICE ADDRESS		BUSINESS PHONE #	CELL PHONE #
PURCHASE DATE (OWNER)	MOVE IN DATE (RENTER)	EMERGENCY CONTACT	EMERGENCY PHONE #
CITY BUSINESS LICENSE #	FEDERAL TAX ID #	DEPOSIT AMOUNT	RECEIPT #
WOULD YOU LIKE TO SIGN UP FOR PAPERLESS STMT?	<input type="checkbox"/> YES <input type="checkbox"/> NO	EMAIL ADDRESS	
WOULD YOU LIKE TO SIGN UP FOR AUTO ACH DRAFT?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF SIGNING UP FOR ACH DRAFT, PLEASE PROVIDE A CANCELLED CHECK. ACH WILL DRAFT 5 DAYS BEFORE THE 20TH OF THE MONTH.	

FOR OFFICE USE ONLY

SERVICE ON DATE	SERVICE OFF DATE	ACCOUNT NUMBER	
DEPOSIT AMOUNT	DATE DEPOSIT RCVD	METER NUMBER	METER SIZE



City of Signal Hill Water Service Deposit Fee Shedule

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METER SIZE	DEPOSIT	
	OWNER	TENANT
5/8"	\$ 40.00	\$ 80.00
3/4"	\$ 40.00	\$ 80.00
1"	\$ 50.00	\$ 100.00
1 1/2"	\$ 60.00	\$ 120.00
2"	\$ 60.00	\$ 120.00
3"	\$ 80.00	\$ 160.00
6"	\$ 80.00	\$ 160.00
8"	\$ 80.00	\$ 160.00
10"	\$ 80.00	\$ 160.00