



# Application for City Services

5400 West Civic Center Drive, Suite 1, Highland, Utah 84003  
 Office Hours: Monday – Thursday, 7:30 a.m. – 6:00 p.m., Closed Friday  
 Office (801) 772-4523 or Fax (801) 756-6903

Applicant Name(s):	Occupancy/Closing Date:	Phone: (     )     -
Street Address (where service is required): <div style="text-align: right;">Highland Utah 84003</div>		
Existing Home <input type="checkbox"/>	New Construction: <input type="checkbox"/>	Owner <input type="checkbox"/> Builder <input type="checkbox"/>
<b>*Please note that Highland City doesn't allow renters to setup utility accounts.</b>		
Mailing Address (if different):		City/State/Zip:
Applicant:	Co-Applicant:	
Phone:	Phone:	
Email:	Email:	
Employer:	Employer:	
Employer Address:	Employer Address:	
Employer Phone:	Employer Phone:	

Garbage Cans: (\$9.61 for first can, \$6.76 additionally) *Green can with green lid.  Number of Cans Presently at Service Address:    0    1    2 Requested Number of Cans:                            0            1            2	Recycle Cans: (\$6.27 per can) *Green can with blue lid.  Number of Cans Presently at Service Address:    0    1    2 Requested Number of Cans:                            0            1            2
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An account setup fee of \$25.00 shall be included with this application. We will also require a closing disclosure or similar document, which includes dates, purchaser names, and the address for the requested property as verification of ownership.

I/we, the undersigned, hereby apply for services with Highland City for the above-named premises and agree to pay any and all charges incurred for said services in accordance with rates fixed by Highland City. Failure to pay my/our bill by the 20<sup>th</sup> of the month will result in a 3% late fee for each month the bill remains unpaid.

My/our failure to pay my/our bill for a period of 30 days or my/us having an excessive balance, will result with discontinuance of my/our service(s). A re-connection fee of \$80.00 plus payment of all outstanding balances must be paid in full before service will be restored. **Services will not be restored after hours.** I/we further agree to allow Highland City’s personnel to enter upon such property to terminate services when I/we have been delinquent in the payment of services, provided I/we have been notified of such proposed termination and the reason thereof prior to such termination.

Any returned payments are subject to \$20 returned payment fee for each instance.

I/we agree to pay all reasonable attorney fees and any and all other cost incurred by Highland City to obtain collection on this account.

<b>Applicant Signature:</b>	<b>Print Signature:</b>	<b>Date:</b>
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Office Use Only

Account Setup Fee (\$25):		Proof of Ownership:		Process Date:	
Subdivision:			Plat:		Lot:
Account #:			Lot Square Footage:		BP:
Culinary Meter ID (include ID type, i.e. B):		Culinary MXU ID (include ID type, i.e. C):		Culinary Meter Reading:	
Latitude:			Longitude:		
PI Meter ID (include ID type, i.e. B):		PI MXU ID (include ID type, i.e. C):		PI Meter Reading:	
Latitude:			Longitude:		
Account Notes (i.e. PI Water Purchase, Sewer Fees pre-payment or deferral):					