

City of Pocatello
Utility Billing Department
911 N 7th Ave/PO Box 4169
Pocatello, ID 83205-4169
(208) 234-6241 (voice)
(208) 234-6577 (fax)
utilities@pocatello.us

CITY OF POCATELLO
APPLICATION FOR UTILITY SERVICE

Along with this application (Signature required on 2nd page), please provide the following documents:

- Warranty Deed (proof of ownership) or Lease Agreement
- Copy of Driver's License if submitting on-line otherwise a copy will be obtained in the office
- Collection or Past Due account notice (Initials and signature required on 3rd page)
- Pursuant to Pocatello Municipal Code, all customers are required to post a utility service deposit per location: **\$150.00** for a single family residence or **\$130.00** for a multi-unit or commercial. Said deposit shall be applied to the account upon closure.

Date Service to Begin: _____ Service Address: _____

Mailing Address if different than Service Address: _____

E-Notification is available if desired. Email address: _____

I hereby certify that I am the (*check one*) owner [] tenant [] property manager [] real estate agent [] contractor [] of the above-described property and that I do hereby accept and will comply with all the rules, ordinances, and regulations which may be prescribed by the City relating to water, garbage, and sewer service and distribution.

COMPLETE THE FOLLOWING **REQUIRED** INFORMATION (PLEASE PRINT)

If the deed or lease is in a business name proceed to page 2.

Please note All parties listed on the Warranty Deed or Lease Agreement will be responsible for this account and must provide required information. If more space is needed for co-applicants, please use the back of this sheet.

Applicant Name: _____

**Preferred Phone Number: _____ Social Security Number: _____

**Automated courtesy phone calls may be sent

Alternate Phone Number: _____

Employer: _____ Employer Phone Number: _____

Emergency Contact: _____ Phone Number: _____

Co-Applicant Name: _____

**Preferred Phone Number: _____ Social Security Number: _____

**Automated courtesy phone calls may be sent

Alternate Phone Number: _____

Employer: _____ Employer Phone Number: _____

Emergency Contact: _____ Phone Number: _____

(Sign 2nd and 3rd pages)

Business Name: _____

Federal Tax ID Number: _____

Business Phone Number: _____

Address if different than service address: _____

Authorized Representative: _____

**Preferred Phone Number: _____

**Automated courtesy phone call may be sent

Position or Title: _____

Alternate Phone Number: _____

Authorized Representative: _____

Phone Number: _____

Position or Title: _____

Alternate Phone Number: _____

**Note: Accounts to be established under the name of a "limited liability company" or LLC are required to provide additional information for review by the City's Legal Department. The LLC information is available upon request.

****IT IS YOUR RESPONSIBILITY TO ADVISE OUR OFFICE OF ANY CHANGES TO THIS ACCOUNT****

Signature of Applicant or Company Representative: _____

Co-Applicant Signature: _____

The deposit can accompany the application by mail to City of Pocatello, Utility Billing, P.O. Box 4169, Pocatello, ID 83205-4169, or if you wish to fax or email the application, the deposit can be paid by phone with a debit or credit card. Please fax your application to (208)234-6577 or email to utilities@pocatello.us. Services will not be effective until all documents and applicable deposit are received. Questions can be directed to (208)234-6241 between 8:00 a.m. to 5:00 p.m. Monday through Friday. Thank you!

OPTIONAL SERVICES AVAILABLE:

Bank Draft – Amount will be deducted from a checking or savings account on the due date listed on your statement. To sign-up, complete a Bank Draft Authorization form and return it with a voided check.

Budget Bill – Budget Bill (Level Pay) can be set up in November after 12 consecutive months of billing history.

On Line Bill Pay – Go to www.pocatello.us, click on Utility Bill Pay. The utility bill pay system allows customers to view their City of Pocatello account for billing, payment and consumption history. Payments can be made online with Visa or Mastercard. Recurring payments can be set up to be paid on the due date listed on your statement with Visa, Mastercard or ACH.

Credit Card Payments – Pay with a debit or credit card by calling (208)234-6241.

**A 3% fee will be charged on all card transactions.

CITY OF POCATELLO
Collection or Past Due Account Notice

By signing below, I (we) am (are) requesting service with the City of Pocatello for water, sewer, and garbage. I (we) further acknowledge that all previous accounts held with the City have been paid in full and that I (we) have no outstanding balance or collection accounts with the City of Pocatello.

I (we) understand that if the City becomes aware of any unpaid account including collection accounts, the City will contact me (us) and payment will be due immediately or current services will be shut off until the balance is paid in full. (Initial) _____ / _____
Applicant Co-Applicant

I (we) further understand that if the final balance at my (our) previous service address remains unpaid after 30 days, the final balance will be transferred to my (our) current service address. (Initial) _____ / _____
Applicant Co-Applicant

Dated this _____ day of _____, _____.

Printed Name: _____

Signed Name: _____

Printed Name: _____

Signed Name: _____