



****OUR FAX # IS 801-336-3889****
****OUR E-MAIL IS utilitybilling@laytoncity.org****

FAX TO: _____ # _____ DATE: _____

Please completely fill out the application card on this page, sign it and return it via fax, mail, e-mail or personally BEFORE you would like to begin service.

Number of garbage cans you will need? _____ (A 2nd can is an additional \$7.65 a month and you must keep it for at least 6 months.)

Effective date to start your service: _____

Phone # where you can be reached if we have any questions: _____

*****If this is a rental property, please have the property owner complete a Landlord's Continuous Guarantee Application*****

Service Start Date: _____	Last Name _____
LAYTON CITY CORPORATION UTILITY SERVICE APPLICATION	
Property Address: _____	Account No. _____
Applicant's Name _____	Spouse _____
Mailing Address (if different): _____	
Phone #: _____	Soc Sec # _____
Employer: _____	Phone # _____
Emergency Contact: _____	Phone #: _____
<p>I hereby apply for the above-checked utility services, and agree to abide by all pertinent ordinances and regulations of the City. I further agree to pay, when, due, the established charges for such services. I agree that the City may shut off the water for failure to pay for the charges when due, and that if turn off is made, all arrears for service, including turn off and turn on charges, shall be paid in full before service is restored. I understand that, in addition to the above, the City may assess interest on the unpaid balance and/or penalty fee, which I will be responsible for paying, in addition to the other charges indicated above. In the event action is required to enforce this agreement, I agree to pay all costs including late fees, collection costs and reasonable attorney's fees.</p>	
Applicant _____	Spouse _____
Owner <input type="checkbox"/>	Tenant <input type="checkbox"/>
If Tenant, Landlord _____	
Continuous Guarantee Certificate on File? Yes <input type="checkbox"/> No <input type="checkbox"/>	