

City of Newport
200 S. Washington Avenue
Newport, WA 99156
(509) 447-5611
(509) 447-2226 Fax

APPLICATION FOR WATER/SEWER SERVICE

OWNER'S ACCOUNT #: _____

PHYSICAL ADDRESS: _____

NAME OF PROPERTY OWNER: _____

OWNER'S MAILING ADDRESS: _____

OWNER'S PHONE NUMBER: _____

PROPERTY OWNER'S EMAIL: _____

IS PROPERTY OWNER OCCUPIED? _____ YES _____ NO

IF NO, RENTER'S NAME: _____

RENTER'S MAILING ADDRESS: _____

RENTER'S PHONE NUMBER: _____

RENTER'S EMAIL: _____

RENTER'S ACCOUNT #: _____

WOULD YOU LIKE THE RENTER TO BE DUPLICATE BILLED? _____ YES _____ NO

DATE OF SALE OR OCCUPANCY: _____

RESIDENTIAL: _____ COMMERCIAL: _____

Signature

Date