



HEATHER GLEN COMMUNITY SERVICES DISTRICT

WATER SERVICE REQUEST FORM

The undersigned requests the Heather Glen Community Services District (HGCS D) to supply WATER SERVICE to the premises listed below. The undersigned agrees to purchase and pay for the water service in accordance with HGCS D's schedule of rates. The undersigned also understands and agrees to comply with the Rules & Regulations related to the service. The meter and box are HGCS D property, and the homeowner is responsible for making them accessible to the District and replacing them if damaged.

ACKNOWLEDGEMENT:

I have received, read, and agree to the Water Service & Collections Policy of Heather Glen Community Services District (HGCS D).

Signature(s):

Date: _____

Date: _____

CUSTOMER INFORMATION

Name(s) to appear on account: _____

Service Address: _____

Mailing Address (if different): _____

Phone Number(s): _____

Email Address(es): _____

Emergency Contact (Optional):

Name: _____

Phone: _____

Email: _____

Thank you for completing your request for service with Heather Glen Community Services District! Please return this form to the email or mailing address listed below to begin processing.

Heather Glen Community Services District
PO Box 715
Applegate, CA 95703

Email: HeatherGlenCSD@gmail.com
Phone: (530) 492-0577
Website: <https://hgcsd.net/>