Maxwell Public Utility District

PO Box 294 / 54 N. San Francisco St., Maxwell CA 95955

APPLICATION FOR UTILITY SERVICES

Thank you for your application for water and sewer services. To initiate services, the fol quired.	lowing information is re-
REQUESTED START DATE	Billing Information:
	Mailing Address:
APPLICANT OR COMPANY NAME	11 00100
SERVICE ADDRESS	City: Zip:
TYPE OF SERVICE REQUESTED WATER SEWER BOTH	Phone:
RENTER OR PROPERTY OWNER	on the same of the same
SERVICE CONNECTION NEEDED: YES NO	
The following information is requested by the Federal Government in order to monitor or prohibiting discrimination against applicants seeking to participate in this program. You a information, but are encouraged to do so. This information will not be used in evaluating inate against you in any way. However, if you choose not to furnish it, we are required to of individual applicants on the basis of visual observation or surname.	are not required to furnish this your application or to discrim-
ETHNICITY: Hispanic or Latino Not Hispanic or Latino	
RACE/NATIONAL ORGIN OF APPLICANT:	
American Indian / Alaska Native Asian Black or African American	topes wan he must some exhelit
Native Hawaiian or Other Pacific Islander White	
GENDER: Female	

CUSTOMER AGREES:

- •As a customer of the Maxwell Public Utility District I agree to comply with all rule, regulations and ordinances of the District.
- •To pay for the utility rates and penalities in effect, subject to change at any time. This contract shall take effect on the date signed and rates shall be charged from the date services are provided. This contract is subject to all applicable provisions of the California Government Code.
- •To not hold the District responsible for any damage by water or by other cause resulting from defective plumbing or appliances on the premises supplied with water, installed and/or maintained by the owner or occupant. Customer acknowledges and agrees not to plead the fact that the District and its agents have inspected the plumbing and appliances as a basis for recovery in case of damage to the premises from defective plumbing or appliances installed by the owner or occupant.
- •To not hold the District responsible for damage caused to the owner or occupant's property when water service is turned on. It is Customer's responsibility to ensure that all faucets on premises are appropriately turned off.
- •That, in case the supply shall be interrupted or fail by reason of accident or any other cause whatsoever, District shall not be liable for damages for interruption or failure, nor shall such failures or interruptions for any reasonable period of time be held to constitute a breach of conract by the District or in any way relieve Customer from performing the obligations of this contract.
- •That failure to receive utility billings is not a valid excuse for failure to pay utility billings when due. The District's office must be notified of any change in occupancy or any change in mailing address.
- •That the District reserves the right at any time to shut off the water supply because of repairs, extensions, nonpayment of rates or any other reason, and the District shall not be responsible for any resulting damage, including bursting of boilers supplied by direct pressure, the breaking any any pipe or fixture, stoppage or interruption of water supply or any other damage.
- •That Customer understands that it is unlawful for any person, unless duly authorized by the District's General Manager, to disturb, interfere with or damage any water main, water pipe, machinery, tools, meters or any other appliances, buildings, improvements, lawns, grass plots, flowers, vines, brushes, trees or other property belonging to, connected with or otherwise under the control of the District.

Please note that all new accounts are subject to verification. Also, if we receive this application in the mail, it may take up to five (5) days to activate your service account once we receive the application.

APPLICANT'S SIGNATURE		

This institution is an equal opportunity provider and employer

If you wish to file a Civil Rights program complaint of discriminiation, complete the USDA Program Discrimination Complaint Form, found online at http://ascr.usda.gov/complaint-filling-cust.html or at any USDA office, or call (866) 6329992 to request the form. You may also write a letter containing all of the information requested in the form. Send you completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Ave., S.W., Washington, D.C. 20250-9410, by fax (202) 690-74442 or email at program.intake@usda.gov.