



# CITY OF MANTECA

## Finance Utility Department – Application to Start Services

Please return application to:

City of Manteca • Finance Department • 1001 W. Center St • Manteca • CA • 95337  
 (209) 456-8740 • (209) 923-8930 fax • [utilitystart@mantecagov.com](mailto:utilitystart@mantecagov.com) e-mail

### APPLICATION TO START WATER/SEWER/GARBAGE SERVICES

Every effort will be made to begin services on your requested start date, however, some orders may be held until the following business day. **All requests received after 4:00pm will be processed the next business day.**

Requested Start Date: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address, if different: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Secondary/Work Phone Number: \_\_\_\_\_

You are requesting that the City of Manteca turn on water at the above service address. Please realize that if all water-using appliances are not completely closed, or if there are any leaks, the premises may suffer water damage. You hereby accept full responsibility for any such damage and agree to hold the City of Manteca harmless if any damage should occur or any injury to persons that may occur due to activation of utility services.

**Personal Information: (State Identification or Driver's License and the last four digits of the Social Security number are required.) If applying by mail, e-mail or fax you must include a copy of your State ID or Driver's License.**

First Name	ML	Last Name	Last 4 of Soc. Sec.	State ID/DL	Signature

**Please check and complete one:**

<input type="checkbox"/>	<b>Owner Occupied</b>	<b>Escrow Close Date</b>	
<input type="checkbox"/>	<b>Landlord/Property Manager</b>	<b>Management Date</b>	
<input type="checkbox"/>	<b>Real Estate Agent</b>	<b>Name of Property Owner</b>	
		<b>Assignment Date</b>	
<input type="checkbox"/>	<b>Renter/Lessee*</b> <small>*The City of Manteca requires copies of Rental or Lease agreements before processing any request for change of service. Please include copies of applicable documents with your application.</small>	<b>Rental Agreement Start Date</b>	
		<b>Landlord Name</b>	
		<b>Landlord Phone Number</b>	

**Enroll in Paperless billing?** All monthly statements will be sent electronically to the email address provided above. *YOU MUST FOLLOW STEPS IN EMAIL TO COMPLETE PAPERLESS ENROLLMENT PROCESS.*

**Please select your garbage cart preference: The City provides carts (Refuse-Brown; Recycling-Blue, Yard Waste-Green).**

<input type="checkbox"/>	<b>Small Cart</b>	<b>\$29.48 per month</b>
<input type="checkbox"/>	<b>Medium Cart</b>	<b>\$31.34 per month</b>
<input type="checkbox"/>	<b>Large Cart</b>	<b>\$33.00 per month</b>
<input type="checkbox"/>	<b>None- Include a Vacation Suspension Service application and Payment</b>	

Note: One change out in the garbage cart size may be made during the first year of service with no change-out fee. After one year of service or the one free change out (whichever comes first), a \$52.82 fee will be charged for every change thereafter. If you are requesting a change in cart size, leave your cart out on your scheduled pickup day until 5 pm each week until the cart is exchanged. Until carts are delivered, please place your refuse out on your pick up day, in heavy-duty garbage bags. You must advise the Solid Waste Department at (209) 456-8440 prior to placing the bags out for pick up.

I understand it is my responsibility to notify the City when services at the above listed service address need to be cancelled. I will remain responsible for all utility services and charges until I have filed an application to stop services. If a stop service form is not received by the City all charges will continue to accumulate on the account until such notice has been received and accepted by the City. Please initial to the left.

If previous customer with City of Manteca, give last address: \_\_\_\_\_

Deposit: A \$100 deposit is required. Per MMC 13.04.070. All persons applying for new service, or making application for a change of service who have not maintained a satisfactory collection record with the city, shall make a deposit at the time of making the application.

Credit Card for paying deposits      VISA \_\_\_ M/C \_\_\_ DISC \_\_\_

Name printed on the card \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp \_\_\_\_/\_\_\_\_

Security Code \_\_\_\_\_ Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_