

# AMERICAN VALLEY COMMUNITY SERVICES DISTRICT

900 SPANISH CREEK RD., QUINCY, CA. 95971-9393

PHONE: 530-283-0836/FAX: 530-283-0838

**APPLICATION FOR SERVICE**

**ACCOUNT NO.** \_\_\_\_\_

<b>SERVICES NEEDED:</b>	<b>WATER</b> <input type="checkbox"/>	<b>SEWER</b> <input type="checkbox"/>
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<b>OWNER'S NAME(S)</b>	<b>DATE</b>
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<b>SERVICE STREET ADDRESS</b>		
<b>BILLING ADDRESS</b>		
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>

<b>E-MAIL ADDRESS</b>	<b>DRIVER'S LIC.#</b>
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<b>HOME PHONE</b>	<b>WORK PHONE</b>
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<b>EMPLOYER</b>
<b>EMPLOYER ADDRESS AND PHONE</b>

**START WATER/SEWER SERVICE ON:** \_\_\_\_\_

Applicant(s) accepts responsibility for payment for the service(s) indicated above at the rates and charges applicable as contained in American Valley Community Services District (AVCSD) Ordinances and Resolutions, a copy of which is available for examination at the District office. Applicant also agrees to conform to and abide by the District's Ordinances, Resolutions, and rules and understands **bills paid after the due date** are subject to a basic penalty of ten-(10) percent and monthly penalty of one-(1) percent. Applicant(s) agree to pay all collection/lien costs on delinquent charges and fees. Applicant(s) agree to notify the District prior to moving/ending service and be responsible for all charges until the AVCSD is so notified. I authorize AVCSD to verify any information I provide, such as employer, etc. I agree to make access available to the water meter(s) at all times.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

*In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. (Not all prohibited bases apply to all programs.) To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer."*

**OFFICE USE:** FEE  INHANCE  IMS  MAP  PHONE

[www.americanvalleycsd.com](http://www.americanvalleycsd.com)

## **Addendum to Application**

“The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.”

**Please check one box for each of the following categories:**

**Ethnicity Category**

- Hispanic or Latino**
- Not Hispanic or Latino**

**Gender**

- Male**
- Female**

**Race Category**

- American Indian or Alaska Native**
- Asian**
- Black**
- Native Hawaiian or Other Pacific Islander**
- White**
- Some Other Race Alone**
- Two or More Races**

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