

Terrebonne Domestic Water District
8300 5th Street, PO Box 31
Terrebonne OR 97760
Office Phone: 541-548-2727 Fax 541-548-0635



**TERREBONNE
DOMESTIC
WATER
DISTRICT**

RENTAL - LEASE- APPLICATION FOR WATER SERVICE

SERVICE ADDRESS

METER READING DATE READ

TENANT INFORMATION

Tenants Name: (Please Print)

Tenants Billing Address:

Tenants Home/Cell Phone #: Work Phone #:

SSN: Drivers License #

Tenant's Signature Date to Start Service
(Start Service Date Must Be On A Future Monday-Friday)

PROPERTY OWNERS INFORMATION AND SIGNATURE MUST ALSO BE PROVIDED PROPERTY OWNERS INFORMATION

Property Owners Name: Owners Phone #

Property Owners Mailing Address:

I, _____ owner and/or designee of the above property would like you to bill my tenant(s) tenant(s) listed above, for water service as of the following date: _____
(Start Service Date Must Be On A Future Monday-Friday)

AS THE OWNER OF PROPERTY: ACCEPT OF RESPONSIBILITY By signing this application, I accept responsibility for payment of this account. If the tenant is being billed, and is delinquent of full payment on move out date OWNER will be billed for full payment of this account including reasonable attorney fees and cost necessary for collection and for compliance with the rules and regulations of the Water District.

OWNERS SIGNATURE: DATE:

DEPOSIT FEE OF \$100.00 IS DUE BEFORE SERVICE DATE: Deposit is refundable after move out date if no balance is due. IF the property owner (who WAS the tenant of this property) wants the water account to stay in his/her names but have the renter billed, there is NO RENTAL DEPOSIT OF \$100.00. If property owner wants the account to be in RENTERS NAME there is a RENTAL DEPOSIT OF \$100.000

Note: Both this form and the required deposit must be delivered to the district office before service will be started.

(Revised & Board Adopted: 08-09-2022)