

**APPLICATION FOR NEW WATER & SEWER SERVICES (Streetlights/Open Spaces)**

If you wish to add a Co-Applicant, please make sure you are both present and both of your information is filled out. Co-Application information on backside of application.



Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Mailing: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_ Last 4 of SSN or Tax ID: \_\_\_\_\_

Driver's License: \_\_\_\_\_ State Issued \_\_\_\_\_

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

Do you own this property? YES \_\_\_\_\_ NO \_\_\_\_\_

Is this a Commercial account? YES \_\_\_\_\_ NO \_\_\_\_\_

Emergency Contact Information: \_\_\_\_\_ Phone# \_\_\_\_\_

Date you would like service to start (Monday through Friday only) Date: \_\_\_\_\_

I, the undersigned, hereby request that M.C.S.D. deliver utility services to the address listed above. I do hereby agree to comply with the applicable provisions of the Rule and Regulations and the standard specifications of the McKinleyville Community Services District which can be found on our website at [www.mckinleyvillecsd.ca.gov](http://www.mckinleyvillecsd.ca.gov) or copies can be provided at request.

Water customers residing west of McKinleyville Avenue are strongly encouraged to install a pressure reducing valve on their side of the meter. M.C.S.D. IS NOT RESPONSIBLE FOR DAMAGES TO PROPERTY RESULTING FROM WATER PRESSURE FLUCTUATIONS.

Applicant Signature \_\_\_\_\_

DATE \_\_\_\_\_

Co Applicant Signature \_\_\_\_\_

DATE \_\_\_\_\_

Receipt#

Total\$

Date

LM#



1656 SUTTER ROAD  
MCKINLEYVILLE, CA 95519



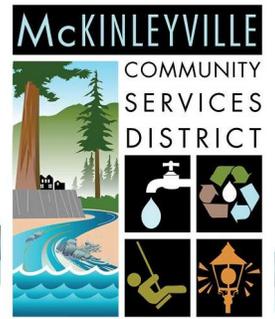
PHONE: 707-839-3251  
FAX: 707-839-8456



[mckinleyvillecsd.ca.gov](http://mckinleyvillecsd.ca.gov)



PO BOX 2037  
MCKINLEYVILLE, CA 95519



**Co Applicant:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Mailing:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

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

**Date of Birth:** \_\_\_\_\_ **Last 4 of SSN or Tax ID:** \_\_\_\_\_

**Driver's License:** \_\_\_\_\_ **State Issued** \_\_\_\_\_



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