

254 Railroad Street | PO Box 162 Wilson Creek, Washington 98860 Phone: 509.345.2531 Fax: 844.473.1909

## UTILITY ACCOUNT APPLICATION

Name(s) on Account:		
	□ Own □ Rent	
Property Address:		
Mailing Address:		
Phone Number(s):		
Email Address:		ive bills via email? ☐ Yes ☐ No rill NOT be sent to your mailing address.
Monthly bills will be so billing cycle, including Creek Municipal Code	ent to the mailing ad g due dates, fees, and and ordinances rele	nd garbage services from the Town of Wilson Creek. ess provided unless electronic copies are requested. The enalties have been disclosed. Copies of the Town of Wilson nt to utility services, are available upon request. Non- property to which utilities have been furnished.
Signature		Signature
Printed Name		Printed Name
Date		Date