City of Stockton Utility Service Application

Street Address:

Primary Applicant Information

Name:					
Mailing Address:					
City:		State:		Zip:	
Driver's License:		Social Security:			
Home Phone:		Cell Phone:		Work Phone:	
Current Employer:					
Employer Address:					
Primary Applicant's Last address:					
1st Time Service with City of Stockton	Select One	If no, where?			

Co-applicant Information

Name:					
Driver's License:		Social Security:			
Home Phone:		Cell Phone:		Work Phone:	
Current Employer:					
Employer Address:					
Co-applicant's Last address:					
1st Time Service with City of Stockton	Select One	If no, where?			

Service Address Information

1. **Requested Start Date for All Services:**

- **Requests for service are processed on the next business day after your application has been received and approved.**
- **Services cannot be started on any closed Friday, furlough day, weekend, or holiday. Requests for these dates will be processed on the following business day.**

2. **Requested Garbage Can Size:** Select One **Only select size of garbage can requested.**
(All services include a 60 gal recycle bin and 90 gal yard waste bin.)

3. **Please Select One:** Select One If Other, please describe:

The following documentation is required and should be sent with this application before it can be processed:

- **Copy of valid, government issued identification**
- **New property owners must include Final Escrow Closing Statement or Certified Grant Deed**
- **Tenants must include copy of a valid Lease or Rental Agreement signed by the property owner**

A deposit of $125.00 per dwelling unit may be required based on the creditworthiness of the applicant plus payment of any delinquent amounts owed by any adult resident at the service address before services can be turned on.

For additional information on deposits, rates, billing schedules, due dates, and delinquency; please visit the Utility Billing Pages on our website at www.stocktongov.com

Signature of applicant: _____ Date: _____

Fill out application completely. Once completed, print and sign the application and return to City of Stockton Utility Billing with all the required documentation. Incomplete applications will delay the start date of your services as they will not be processed. You may return the requested information in one of the following ways:

1. **Scan and email information to utilities@stocktonca.gov**
2. **Fax information to (209) 937–8051**
3. **Mail information to City of Stockton P O Box 1571 Stockton, CA 95201 (When requesting a service start date, please allow for adequate mailing time)**

If you have any questions, please call Customer Service at (209) 937-8295 during regular business hours.

Date Received_____ Effective Date_____ Deposit Amount_____

C_____ L_____ *(For Office Use Only)*