



Utility Service Agreement

128 S Main
PO Box 445
Condon, OR 97823
Ph. (541)384-2711
Fax (541)384-2700
www.cityofcondon@jncable.com

Service Address: _____ Start Date: _____

Name: _____ [] Owner [] Renter

Mailing Address: _____

Home Phone #: _____ Cell Phone #: _____

Driver's License #: _____ State: _____

Owner Name: _____ Owner Phone #: _____

Deposit

A deposit shall accompany each application for use of water and sewer service from the city system. Deposit is **\$150.00** due at the time of request and is refundable after 12 consecutive months of payments that have been made on or before the 10th of each month. Deposits shall be held by the city and applied to any unpaid balance due from applicant upon vacation of premises. If service is discontinued the amount of the deposit shall be refunded or applied to remaining balance and remainder refunded.

Payment

A drop slot is available 24/7 for check, cash or money order payments next to the main entrance of City Hall. Service charges of 1% will be assessed after the 10th of each month on unpaid bills. Bills are mailed approximately the last working day of the month and are due by the 10th of the following month.

Shut off

The City of Condon will charge a **\$25.00** re-connection fee which includes meters shut off for non-payment or seasonal re-connect.

Disputes

If there is a disagreement over the bill from the City of Condon, the minimum amount must be paid and the City Hall contacted immediately to determine if a correction needs to be made.

Landowners

All landowners are ultimately responsible for all unpaid utility bills (The City of Condon. §50.02(E)).

I have read and understand the requirements. I agree to conform to the rules, regulations, and ordinances as a condition for use of water and sewer service, referred to as city service charges. Applicant further agrees to notify the City in writing the date that Applicant ceases to need City services or otherwise vacates the premises served. Charges will continue until the City is notified.

Applicant Signature: _____ Date: _____