



# Hayden Lake Sewer District

9393 North Strahorn Road

Hayden Lake, ID 83835

208-772-4379

hlsdclerk@haydenlakesewerdistrict.org

A sewer account application fee of \$25.00 will be added to your first invoice.

Section 1:

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

Section 2:

Owner Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

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

If the property is to be rented or managed by someone other than the owner, please complete Section 3 below.

Section 3:

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

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

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

I have read the contents of this application and I hereby certify that contents are true and complete.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*FOR OFFICE USE ONLY*

Total Amount Paid \$ \_\_\_\_\_ Cash/Money Order/Check # \_\_\_\_\_

Date: \_\_\_\_\_ Account Number: \_\_\_\_\_ Employee: \_\_\_\_\_