



# CITY OF WILLAMINA MOVE-OUT APPLICATION

## RESIDENT INFORMATION

<b>Name (First &amp; Last):</b>	
<b>Move-out Date:</b>	<b>Requested water turn off date:</b>
<b>Reason for moving out*</b> <input type="checkbox"/> I am a renter moving out <input type="checkbox"/> Sold property <input type="checkbox"/> I am moving to other residence	
<b>Service Address:</b>	
<b>Forwarding Address:</b>	
<b>Phone:</b>	<b>Email:</b>

## PROPERTY OWNER INFORMATION (if different)

<b>Rental (circle one)    Yes    No</b>
<b>Owner/Landlord Name:</b>
<b>Mailing Address:</b>
<b>Phone:</b>

By signing below, I affirm that all information on this form is correct. I acknowledge that a final read will be conducted based on my requested turn off date, or the next business day. Any utility deposit on my account will be applied toward the final bill. If an amount is still owed, a final bill will be mailed to the forwarding address above. If my account has a credit balance, a check will be issued by the City of Willamina and mailed to the forwarding address above. ALL DELINQUENT AND UNPAID CHARGES WILL BE SENT TO COLLECTIONS AFTER 60 DAYS. You may submit the form and any questions to [utilities@ci.willamina.or.us](mailto:utilities@ci.willamina.or.us).

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

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

\*If you are the property owner and have not sold the property, the base rate for water and sewer service, safety, and utility fees must be paid monthly by the property owner regardless of occupancy.

OFFICE USE ONLY	
<b>Final Read Date:</b>	<b>Final Bill Date:</b>
<b>Completed by:</b>	<b>Notes:</b>