SAN GABRIEL VALLEY WATER GOMPANY

11142 GARVEY AVENUE EL MONTE, CALIFORNIA 91733

Revised

Cal. P.U.C. Sheet No. 3317-W

Revised Cancelling

Cal. P.U.C. Sheet No.1080-W&1081-W

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	FORM No. 1 APPLICATION FOR WATER SERVICE	
	See the following four pages	(D)
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		(N)
(To be inserted by utility)	Issued hv	(To be inserted by Cal. P.U.C.)

Advice Letter No. _____ 598

J. M. Reiker

Date Filed _____02/26/2024

Decision No.

Vice President of Regulatory Affairs

Effective 02/26/2024

Resolution No. ____



RESIDENTIAL SERVICE APPLICATION / DISCONNECT APPLICATION

New Customer Name	Date Service Requested
Service Address	Move in Date
Mailing Address	
Email Address	
Disconnect date Prior Service Address	
Primary Phone No Secondary Phone No	
California Driver License No	
OR other government Issued ID No	
Co-Applicant Name	
Co-Applicant Phone No	
Co-Applicant E-Mail Address	
Owner □ Renter □ Agent □ Contractor □	
Property Manager Name	Agent Name
I hereby apply for water service at the above premises and I agree to use rules and regulations from time to time legally in effect and on file with California. Furthermore, all plumbing and fixtures on said premises are i release, and agree to indemnify and hold harmless San Gabriel Valley V liability arising in any manner from turning on the water. A deposit may I	the Public Utilities Commission of the State of in proper condition to receive water. I do hereby Vater Company from all claims, loss, expense or
I HAVE READ AND I UNDERSTAND THE FOREGOING PRINT NAME	SIGNATURE OF APPLICANT

New Service request will be processed on the following business day

ATTENTION

The completed application MUST be SIGNED AND RETURNED WITH A COPY OF YOUR DRIVER LICENSE or other government issued ID

San Gabriel Valley Water Company

Mailing Address: P.O. Box 6010, El Monte, CA 91734 FAX: 626-448-2105 E-MAIL Address: <u>customerservice_elmonte@sqvwater.com</u>

City of Industry

Mailing Address: 14404 Valley Boulevard, City of Industry, CA 91746 FAX: 626-968-2568

E-MAIL Address: <u>customerservice industry@sgvwater.com</u>

Whittier

Mailing Address: 11579 Hadley Street, Whittier, CA 90606 FAX: 562-699-0211 E-MAIL Address: <u>customerservice</u> <u>whittier@sgvwater.com</u>

If you have any question concerning water service. Please call (626) 448-6183



BUSINESS SERVICE APPLICATION / DISCONNECT APPLICATION

New Customer Name	Date Service Requested
Service Address	Move in Date
Mailing Address	Disconnect Date
Prior Service Address	
Primary Phone No Secondary F	hone No
California Driver License No	
Federal Tax ID	
OR other government Issued ID	<u>.</u>
Authorized Officer Name	Title
Business Phone No Extensi	on No
E-Mail Address	
Customer Classification: Commercial □ Industrial □ Owner□ Renter□ Agent□ Contractor□	Public Authority □ Landscape □ Fire Service □
	Agent Name
rules and regulations from time to time legally in effect a Furthermore, all plumbing and fixtures on said premis	s and I agree to use and pay therefore in accordance with the rates, nd on file with the Public Utilities Commission of the State of California. es are in proper condition to receive water. I do hereby release, and ey Water Company from all claims, loss, expense or liability arising in be required for service.
HAVE READ AND I UNDERSTAND THE FOREGOIN	PRINT NAME SIGNATURE OF APPLICANT
	TITLE

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E-MAIL Address: customerservice whittier@sqvwater.com

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RESIDENTIAL SERVICE APPLICATION / DISCONNECT APPLICATION

New Customer Name		Date Service Requested		
Service Address		Mov	e in Date	
Mailing Address				
Email Address				
Disconnect date	Prior Service Address			
Primary Phone No	Secondary Phone No			
California Driver License No				
OR other government Issued ID No				
Co-Applicant Name				
Co-Applicant Phone No.				
Co-Applicant E-Mail Address				
Owner □ Renter □ Agent □ Contrac	tor 🛘			
Property Manager Name		Agent Name		
I hereby apply for water service at the a rules and regulations from time to time California. Furthermore, all plumbing an release, and agree to indemnify and ho liability arising in any manner from turni	e legally in effect and on file with nd fixtures on said premises are in ld harmless San Gabriel Valley W	the Public Utilities Com n proper condition to rec ater Company from all c	mission of the State of eive water. I do hereby	
HAVE READ AND I UNDERSTAND T	HE FOREGOING	SIGNATURE	OF APPLICANT	

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Fontana Water Company

Mailing Address: P.O. Box 987, Fontana, CA 92334 E-MAIL Address: customerservice@fontanawater.com

If you have any question concerning water service. Please call (909) 822-2201



BUSINESS SERVICE APPLICATION / DISCONNECT APPLICATION

New Customer Name	Date Service Requested
Service Address	Move in Date
Mailing Address	Disconnect Date
Prior Service Address	
Primary Phone No Secondary Phone	ne No
California Driver License No	
Federal Tax ID	
OR other government Issued ID	
Authorized Officer Name	Title
Business Phone No Extension I	No
E-Mail Address	
Customer Classification: Commercial ☐ Industrial ☐ Pub	olic Authority □ Landscape □ Fire Service □
Owner□ Renter□ Agent□ Contractor□	
Property Manager Name	Agent Name
rules and regulations from time to time legally in effect and Furthermore, all plumbing and fixtures on said premises	nd I agree to use and pay therefore in accordance with the rates, on file with the Public Utilities Commission of the State of California. are in proper condition to receive water. I do hereby release, and Water Company from all claims, loss, expense or liability arising in required for service.
I HAVE READ AND I UNDERSTAND THE FOREGOING	PRINT NAME SIGNATURE OF APPLICANT
	TITLE

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