



CITY OF WEST WENDOVER  
P.O. Box 2825, West Wendover, Nevada 89883  
Office: (775) 664-3081 Fax: (775) 664-3720

**IRRIGATION WATER ACCOUNT**

BUSINESS NAME: \_\_\_\_\_

COMPANY REPRESENTATIVE: \_\_\_\_\_ DATE SERVICE REQUESTED: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

TAX I.D. NUMBER: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

LOCATION TO BE SERVED: \_\_\_\_\_

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**NEW ACCOUNT FEE SCHEDULE**

PROCESSING FEE - \$20.00 \_\_\_\_\_ WATER DEPOSIT - \$100.00 \_\_\_\_\_

TOTAL FEES & DEPOSITS \$ \_\_\_\_\_

RECEIVED BY \_\_\_\_\_ DATE RECEIVED \_\_\_\_\_

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**MONTHLY CHARGES**

\$18.00-WATER UP TO 8,000 GALLONS  
\$2.86-PER THOUSAND OVER 8,000

**\*DEPOSIT REFUND INFORMATION:** \$100.00 water deposit will be refunded after twelve months or after final termination billing has been paid. Any payment that is late will result in the loss of this deposit.

**\*PENALTY INFORMATION:** Penalties will be assessed on all past due accounts at the rate of 10% for the first month and an additional 1.5% per month thereafter. A reconnection charge of \$25.00 and penalties must be paid to the City before reinstating service, following a disconnection

**\*RETURN CHECK POLICY:** Any returned check must be reimbursed to the City with cash, money order or cashier's check only. There will be a fee of \$20.00 for each returned check.

\*By signing this application, applicant agrees to comply with the City utility regulations, including any future amendments adopted by the City Council in a regular City Council Meeting. Applicant further agrees to pay utility bills promptly.

\*ALL APPLICATIONS RECEIVED AFTER 3:00 PM WILL BE FORWARDED TO THE NEXT BUSINESS DAY

"The City of West Wendover is an Equal Opportunity Provider"

Applicant Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_