



City of Casa Grande

New Residential Wastewater and Sanitation Account Activation

Welcome to the City of Casa Grande!

Please fill out the attached New Residential Wastewater and Sanitation Account Activation form as completely as possible.

- All persons named on the account must sign the application and submit a clear copy of any state issued identification or a copy will be made at the time of submission.
- Owner - A copy of proof of property ownership is required such as a Settlement Statement or Deed. The owner is billed from the day they are deemed the property owner. Per City Code, the owner of the property is billed regardless of whether the home is occupied or vacant.
- Renter – Renters are billed from the day they move in. This is the Start Date. When the renter moves out, please notify us and the billing will revert back to the owner.

This form must be submitted along with required information to the City's Finance Department by:

- Mail – 510 E Florence Blvd, Casa Grande, AZ 85122
- Email – accountinfo@casagrandeaz.gov
- In Person – 510 E Florence Blvd, Bldg B. The Finance & Administrative Services building is white/tan directly across from Whataburger. The parking lot can be accessed from Florence Blvd. Hours of operation: 8 AM to 5 PM Monday to Friday (excluding Holidays).
- Drop Box – The city's drop box is conveniently located in the parking lot next to City Hall Bldg B at 510 E Florence Blvd. The parking lot can be accessed from Florence Blvd.

For further information, please contact the Finance Department at (520) 421-8601.

For additional information regarding the City please visit our website at

www.casagrandeaz.gov or connect via social media at

www.casagrandeaz.gov/web/guest/social-media.



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New Residential Wastewater and Sanitation Account Activation

City of Casa Grande
510 E Florence Blvd
Casa Grande, AZ 85122
Phone: 520-421-8601
www.casagrandeaz.gov
accountinfo@casagrandeaz.gov

Owner* Settlement Date:

*Copy of Proof of Ownership Required – Property owners are billed from the Settlement date.

Renter Start Date:

Service Address: Email:

Mailing Address:

Preferred Method of Receiving Statements: Email or Mail

Information

Customer 1

Customer 2

Customer Name:	<input type="text"/>	<input type="text"/>
Date of Birth/SSN:	<input type="text"/>	<input type="text"/>
Phone Number:	<input type="text"/>	<input type="text"/>
Employer Name:	<input type="text"/>	<input type="text"/>
Employer Address:	<input type="text"/>	<input type="text"/>
City/State/Zip	<input type="text"/>	<input type="text"/>

Nearest Relative Not Living With You

Name: <input type="text"/>	Phone Number: <input type="text"/>
Address: <input type="text"/>	City/State/Zip: <input type="text"/>

Sanitation Service

Alley Service: 300-gallon container for 4 houses. Do you have an alley?	<input type="radio"/> Y <input type="radio"/> N
Curb Service: Is there a trash bin at this location? (\$82 New Container Fee)	<input type="radio"/> Y <input type="radio"/> N
No Fee Recycle Program: Do you have a recycle bin? If no, enter # of recycling bins requested.	<input type="radio"/> Y <input type="radio"/> N ____ # bins

<u>For Office Use Only</u>
Trash bin ordered? <input type="text"/>
Recycle bin ordered? <input type="text"/>

PLEASE ATTACH A COPY OF ANY STATE ISSUED IDENTIFICATION OF ALL PERSONS NAMED ON ACCOUNT OR A COPY WILL BE MADE AT THE TIME OF SUBMISSION.

By signing this form, I agree to make payments by the 20th of every month. Any payment not received by the due date will be assessed a 1.5% per month penalty.

(Signature-Customer 1)

(Date)

(Signature-Customer 2)

(Date)

Payments can be made via mail, on line, Surebill, or by calling (520) 421-8601. Please ask for information regarding these payment options.