## **CITY OF ROSEBURG**

## Application for Bulk Water Filling Station Use $\underline{\textit{Please Print}}$



Today's Date:			THE COUNTY OF THE STATE
Company/Indivdual	l:		_
Applicant Information			
Full Name:	Last Fi	irst Mi	Date of Birth:
Billing Address:	Street	City	State Zip
TIN or Social Security No:		Driver's License No. / State ID Card:	
Contact Phone No:		_ License Plate: _	
Email Address:		(Used to provide applicant w	vith account number and PIN)
Requested 4 Number	r PIN	-	
they may become cha records of hauled wat of sale, the quantity o maintained for 12 mo immediately upon req	anged or amended by the City of Feter sales that include the name and of water purchased and the license on the after the sales date and must quest. I further acknowledge that ange, I acknowledge my responsib	s, & regulations pertaining to my water Roseburg. Per the State of Oregon, a value contact information of the person that e plate of the vehicle(s) used to haul water to be given to law enforcement or the War I will not share my account access with bility of updating my account with the	water supplier must maintain at purchased the water, the date rater. The record is required to be Vater Resources Department th anyone else. Should license
Additional vehicle license plate numbers that will be utilized by this applicant			
License Plate:			
License Plate:		License Plate:	
For City Use - Do No	ot Fill In		
Account #		PIN#	
Identity Check Infor	rmation ·		