

Utility Activation Form



Please connect my: water _____ , gas _____ , or both _____.

Requested activation date: _____

Account holder (please print): _____

Mailing Address: _____

Address where service is located: _____

Phone Number: (_____) _____

By signing below, the account holder agrees to the full terms and conditions of the City of Clifton's water, wastewater, natural gas, and sanitation policies. Should the account be considered past due, the account holder is responsible for all collection costs, attorney fees, and/or court costs necessary for the account to be paid in full.

Signature: _____ Date: _____

Office Use Only

Amount Paid: \$ _____ Account Number: _____

Payment accepted by: _____

