



# WELCOME TO THE CITY OF SHOW LOW!

## APPLICATION FOR UTILITY SERVICES Return

### this sheet with the attached form to:

#### Office Location:

Show Low City Hall, Utility Department  
180 N. 9<sup>th</sup> Street  
Show Low, Arizona 85901

#### Contact Information:

Phone: (928) 532-4005  
Fax: (928) 532-4044

Email: [kross@showlowaz.gov](mailto:kross@showlowaz.gov)

#### Office Hours:

Monday – Friday 8:00 a.m. to 5:00 p.m.  
(excluding holidays)

The attached form is needed to start your utility service with the City of Show Low.

Please fill out this form completely and sign your signature at the bottom of the next page. When you return this form, please include either a letter of credit from any utility company that shows one year of a timely and consistent payment history for you or a \$150 security deposit. This deposit is credited to your account after one year of timely payments, or if you close your account, it will be applied to your final bill. The security deposit will be reduced to \$75 if you sign up for electronic auto-pay today.

There is also a \$25 service fee for water service. This service fee is charged when there is a change in the utility account name or if the water is turned on or off. The \$25 fee will be reflected on your first bill.

Today's Date: \_\_\_\_\_

Service Start Date: \_\_\_\_\_

MONDAY – FRIDAY EXCLUDING HOLIDAYS  
(1) BUSINESS DAY NOTICE REQUIRED

**CITY OF SHOW LOW  
APPLICATION FOR UTILITIES**

<b>FOR OFFICE USE ONLY</b>	
DEPOSIT AMOUNT \$ _____	DATE _____
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CC <input type="checkbox"/> LETTER OF CREDIT	BY _____
	ACCT # _____

**\*\*INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

SERVICE ADDRESS			TODAY'S DATE			SERVICE START DATE		
Own/Rent Property	Own	Rent	Type of Account	Residential	LandLord	Commercial		
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

APPLICANT INFORMATION				
CUSTOMER NAME			LAST 4 S.S. #	DATE OF BIRTH
MAILING ADDRESS	CITY	STATE	ZIP	PHONE NUMBER
EMPLOYER				EMAIL

CO-APPLICANT/SPOUSE INFORMATION (IF APPLICABLE)				
CUSTOMER NAME			LAST 4 S.S. #	DATE OF BIRTH
MAILING ADDRESS	CITY	STATE	ZIP	PHONE NUMBER

**Terms and Conditions of Service  
(Please read carefully)**

1. **Please note: "PER CITY POLICY, ONCE A WATER METER HAS BEEN INSTALLED YOU WILL BEGIN RECEIVING A BILL FOR WATER, SEWER, TRASH, AND RECYCLING. THANK YOU FOR YOUR UNDERSTANDING AND COOPERATION IN THE MATTER."**
2. The applicant agrees to pay each utility bill in full for all charges by the due date shown on the bill.
3. The applicant agrees to pay a late fee for any bill not paid by the 25<sup>th</sup> of the month and the account holder agrees and understands that the City has the right to terminate the associated utility service if payment of any bill, including late fees, deposit amounts, and all other assessments, are not paid in full.
4. The applicant understands that a \$25 fee will be assessed against the account holder if the City of Show Low's water valve at the meter is turned off or on by the account holder, except for an emergency. Service calls made after hours will be subject to an after-hours charge. Interpretation of all emergencies shall be at the sole discretion of the City. If a valve breaks during account holder's use of the valve, account holder agrees to pay all costs for replacing the valve.
5. The applicant agrees and acknowledges that if utility service is terminated for non-payment of the utility bill, a fee will be required in addition to payment of all past charges before the water is turned back on.
6. The applicant agrees that if the City incurs any collection costs to recover past due amounts from the account holder for utility services, account holder will pay all such collection costs in addition to the outstanding balance of the account holder's account. "Collection costs" shall include all fees incurred by the City, including but not limited to, actual attorney's fees or any contingency fees charged by an attorney or a collection agency before and/or after a lawsuit is filed.
7. **Since issues may occur when water is turned on, The City of Show Low highly recommends that someone with access to the dwelling be present when services are turned on.**
  - **WILL SOMEONE BE THERE FOR THE TURN-ON?** YES:  [ ] INITIAL NO:  [ ] INITIAL
  - **IF YOU ANSWERED YES, IN CASE NO ONE IS PRESENT WHEN THE TECHNICIAN ARRIVES AT YOUR SCHEDULED TIME, DO YOU STILL WANT THE WATER TURNED ON?** YES:  [ ] INITIAL NO:  [ ] INITIAL
8. When services are turned on, be sure that all faucets and landscaping water is turned off. If you have a main valve on your dwelling, please turn it off. If it appears water is running inside or outside the dwelling, the water service will NOT be turned on. You are responsible for all water usage and any damage that may occur when the water is turned back on.
9. The applicant agrees to comply with all regulations of the City relating to utility services. The account holder agrees that failure to comply with such regulations may result in the termination of utility services.

BY SIGNING THIS APPLICATION, I AFFIRM THAT I AM RESPONSIBLE FOR THE PAYMENT OF ALL  
UTILITY SERVICES PROVIDED BY THE CITY. \_\_\_\_\_

Applicant Signature / Date

# SURE PAY AUTHORIZATION FORM (OPTIONAL)

FOR OFFICE USE ONLY

CITY OF SHOW LOW ACCOUNT NO. \_\_\_\_\_

TO PAY BY		CHECKING ACCOUNT OR SAVINGS ACCOUNT (PLEASE SELECT BOX)	
CUSTOMER NAME (Shown on the bank statement)		CONTACT PHONE NUMBER	
CUSTOMER BILLING ADDRESS	CITY	STATE	ZIP
BANK NAME		BRANCH LOCATION	
CHECKING/SAVINGS ACCOUNT NO.		BANK ROUTING NO.	
CUSTOMER BILLING ADDRESS		EMAIL ADDRESS	

TO PAY BY		CREDIT CARD OR DEBIT CARD (PLEASE SELECT BOX)	
CUSTOMER NAME (Shown on the debit/credit card)		CONTACT PHONE NUMBER	
CUSTOMER BILLING ADDRESS	CITY	STATE	ZIP
16 DIGIT CARD NO.		EXPIRATION DATE	SECURITY CODE
CUSTOMER BILLING ADDRESS		EMAIL ADDRESS	

I authorize the City of Show Low to automatically draft the financial institution named above for the monthly payment of my utility bill. I authorize the financial institution named above to pay each amount from my savings/checking account or credit/debit card account (whichever is applicable) every month. Payment will be made on the due date shown on my utility bill.

I understand that I must contact the City of Show Low regarding bill discrepancies prior to the scheduled draft date. I may cancel this authorization by notifying the City of Show Low to remove my account from the Sure Pay plan. The City of Show Low will have 30 days to change my billing. I understand the City of Show Low reserves the right to terminate my participation in the Sure Pay plan. I understand that the City of Show Low may impose a nominal fee if a bill is not paid by my financial institution.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

If you wish to **stop service, report a change in billing address, or obtain information regarding our bill or service**, call the Utility Department at (928) 532-4005.

To report an **EMERGENCY** during business hours (Monday through Friday 8:00 a.m. to 5:00 p.m.), call (928) 532-4100; on **weekends and after hours**, call (928) 537-4365.

## PAYMENTS AND BILLING PERIOD

### **WHEN PAYING BY MAIL:**

Make check payable to **"City of Show Low"**. Be sure to enclose the lower portion of bill to ensure proper credit to your account. Your canceled check is your receipt. For your own protection, do not send cash by mail.

**MAIL TO:** City of Show Low, Utility Dept.  
180 N 9<sup>th</sup> Street  
Show Low, AZ 85901

### **TERMS OF PAYMENT:**

All charges are due and payable upon receipt of this statement and shall become delinquent 15 days after the statement date. All delinquent accounts may be subject to a penalty charge.

**If charges remain unpaid for 30 days after issuance of the statement, a turn-off order will be issued and a mandatory charge shall be paid for each occasion that a City employee is dispatched to disconnect and/or connect services due to nonpayment. Your account may be subject to additional penalties. If a check is returned due to insufficient funds, your account will be charged for the amount of the check plus a \$25 NSF fee. If a check is not honored by your financial institution more than twice in a 12-month period, you will be placed on a cash-only basis.**

### **SURE PAY (AUTOMATIC BILL PAYMENT SERVICE):**

If you would like to have your payment automatically deducted from your checking account, please fill out the top portion of this form and return it with a voided copy of the check to be drawn on the financial institution you elect to use to the Utility Department at least 10 working days prior to your next billing cycle to ensure the Sure Pay plan is implemented with your next bill.

Each month you will receive a utility bill with a note indicating the dollar amount and the date that your account will be drafted. Sure Pay payments will be deducted from your account the 15<sup>th</sup> of each month. If the 15<sup>th</sup> falls on a weekend or holiday, the Sure Pay payment will be deducted the next business day. You have up to 10 working days to contact the City of Show Low regarding billing discrepancies. Sure Pay payments returned for insufficient funds will be subject to charges similar to those for a returned check. If your account cannot be deducted due to insufficient funds twice within 12 months, your account will be removed from the plan. If you wish to cancel your Sure Pay agreement with the City of Show Low, you must do so at least 10 days prior to your next billing cycle. The City of Show Low requires 30 days to change your billing method. The City of Show Low reserves the right to terminate Sure Pay participation without prior notice to the customer.

**CITY OF SHOW LOW  
UTILITY RATE TABLE**

Resolution 2014-39  
Effective 7/1/2021

<b>Water Rates</b>				
Rate Code	Meter Sizes	Usage Allowance	Base Fee	Rate per 1,000/gal
101	5/8 - 3/4"	5,000	31.01	3.05
102	1"	5,000	47.94	3.05
103	1 1/2"	11,000	100.74	3.05
104	2"	22,000	216.68	3.05
105	3"	44,000	446.07	3.05
106	4" +	67,000	718.94	3.05
<b>Water Rates - Outside City Limits</b>				125%
Rate Code	Meter Sizes	Usage Allowance	Base Fee	Rate per 1,000/gal
111	5/8 - 3/4"	5,000	38.76	3.81
112	1"	5,000	59.92	3.81
113	1 1/2"	11,000	125.92	3.81
114	2"	22,000	270.85	3.81
115	3"	44,000	557.57	3.81
116	4" +	67,000	898.67	3.81
<b>Wastewater Rates</b>				
Rate Code	Description	Base Fee	Rate per 1,000/gal	
301	Residential	34.24	n/a	
351	Residential - Low Pressure	47.42	n/a	
303	Commercial	28.20	3.23	
361	Commercial - Low Pressure	43.21	3.23	
310	Multi Family/Mobile Home Park	28.20	3.23	
311	Offices/Business/Retail	28.20	3.23	
314	Churches	28.20	3.23	
316	Motels and Hotels	28.20	3.23	
318	Schools	28.20	3.23	
320	Bars	28.20	3.23	
<b>Sanitation Rates - Resolution 2011-07 (effective July 1, 2017)</b>				
Rate Code	Description	Base Fee		
501	First Polycart (One trash, one recycling)	15.92		
502	Additional Polycart	7.03		
<b>Miscellaneous Rates</b>				
Rate Code	Description	Base Fee		
2101	Water Rights Preservation Fee (per month/per active Residential water account)	3.00		
	Seasonal/Inactive Status (resolution R2013-04) - Effective 5/02/13 - Includes connect/disconnect fee for water customers - Fee is due and payable immediately. If not paid in full at time of disconnection the standard late fee shall be applied for all outstanding balances - Account must be current prior to reconnection - Includes all services	150.00		
	Water Connection	25.00		
	Water Disconnect	25.00		
	After Hours Call Out	40.00		
	Re-Read/Read Only	25.00		
	Bulk Meter Activation	150.00		
	Bulk Meter Deposit	800.00		
	Non-Sufficient Funds fee	25.00		
	Late Fee (applied 10 days after billing due date)	10.00		
	Security Deposit	150.00		
	- with autopay sign up and continued active autopay	75.00		
	- refunded after 12 consecutive months of prompt payment - may be waived with letter of credit showing 1-year of prompt payment history from previous utility			
	Water Rights Preservation Fee for Commercial Accounts	Tiered Rate		