Town of Platteville
400 Grand Avenue
Platteville, CO 80651
(970) 785-2245 (970)785-2476 Fax

UTILITY REQUEST FORM

Proof of current residency and identification must accompany this form. We will not process your request unless you provide these documents.

*****Please Print*****

Today's Date_____ Effective Date_____

Name:_____
Last First MI

Service Address:_____

Mailing Address:_____

Home Phone:(____)_____Work Phone:(____)_____Cell Phone:(____)_____

Email:_____

Emergency Contact:_____Phone:_____
Last First

Select One: ☐ Own ☐ Lease/Rent

Property Owner:_____Phone:_____
Last First

Explain Request:_____

(Please Circle Which Applies)

Water is:	**Turn Water :**
ON OFF UNKNOWN N/A	ON OFF N/A

Trash Service:
(If not selected, trash service will automatically be connected)
CONNECT DISCONNECT

Signature_____ Date_____

Official Use Only

Customer Account No:_____ **Co-Signer Account No**:_____

ID No:_____ State:____ **Proof of**: Ownership Rental Lease

Changes Made By: _____ **Date Made**:_____