



# CORONA

## DEPARTMENT OF WATER & POWER CONTINUOUS SERVICE AGREEMENT

The Continuous Service Agreement allows property owners and managers to maintain uninterrupted water service while a rental property is vacant. By signing this form, owner agrees to / understands the following:

1. The meters for the properties listed on this Agreement will be transferred automatically into the owner's name when a tenant discontinues service with the City of Corona Department of Water and Power (Corona DWP). The owner will be responsible for all services and charges until the time a new tenant establishes service.
2. This agreement will stay in effect until the owner notifies Corona DWP in writing at least 5 working days prior to cancellation. Liability for charges incurred during any period that Corona DWP was not notified will be the owner's responsibility.
3. Upon cancellation of this Agreement, any active service in the owner's name listed on this agreement will be turned off

unless Corona DWP is notified otherwise.

4. The initial New Account Set-up fee(s) will not be waived. Only subsequent New Account Set-up fee(s) will be waived.
5. It is the owner's responsibility to inform the tenants of their need to establish their account with Corona DWP at the time of occupancy.
6. The owner must notify Corona DWP of any changes of contact information or mailing address.
7. This agreement does not prevent disconnection of service due to a tenant's or owner's nonpayment of bills or deposit.

Account Holder Name: \_\_\_\_\_

Contact Name (if different): \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_

Last four digits of social security number or Tax ID: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Account Number: \_\_\_\_\_

Customer Number: \_\_\_\_\_

Email Address : \_\_\_\_\_

Please list below all addresses for the rental properties you wish to be included under this agreement. For additional dwellings please list on a separate page.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**By signing below, I acknowledge that I have read the Agreement and agree to such terms and conditions.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail, e-mail, or fax your completed application to:

City of Corona , Customer Care Team

P.O. Box 950, Corona, CA 92878-0950

E-mail: [CustomerCare@CoronaCA.gov](mailto:CustomerCare@CoronaCA.gov)

Fax: (951) 736-2455 Phone: (951) 736-2321

For Office Use Only:			
Received _____	Date _____	Start Date _____	
Approved _____	Date _____	Audit/Scan/Attach _____	Date _____