



## CITY OF LEWISTON

P.O. Box 617 or 1134 F Street, Lewiston, ID 83501

Phone: 208.746.3671 / Fax: 208.746.1907 / Email: [ubinquiries@cityoflewiston.org](mailto:ubinquiries@cityoflewiston.org)

---

### APPLICATION FOR TEMPORARY SUSPENSION OF SERVICE City Code Sec 36.5-28

Account #: \_\_\_\_\_

Date Requested to Suspend Service: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Property Location: (Street Address) \_\_\_\_\_

Mailing Address: (During Suspension) \_\_\_\_\_

---

Phone Number (s): \_\_\_\_\_

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

Additional Information: \_\_\_\_\_

The property owner shall remain responsible for all base charges with respect to water, wastewater, and solid waste or any other utility. In addition, he/she shall also be responsible for any water and wastewater services and or charges used during the suspension. In order to only be charged the base fee for sanitation service the mobile cart it will need to be visible from the road so it can be picked up. Upon return of services and the mobile cart a \$15.75 return cart fee will be assessed on the next billings.

Please provide at least a 3 business day notice when services are to be restored. When this form is submitted via email you will receive an email confirming receipt of application.

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

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