

Request for Deposit Refund Form

Mail to: City of Caldwell

P.O. Box 880, Caldwell, ID 83606

Fax: (208) 454-3640

E-mail request to: water@ci.caldwell.id.us

After twenty-four (24) months of clean credit history (no delinquencies, no violations of connection protocols), the deposit of a PROPERTY OWNER may be refunded or applied as credit to the account upon written request. Any delinquencies or connection violations will restart the credit history clock.

Section 4, #5 Caldwell Utility Billing Policy

I _____, the property owner of _____ do request that the deposit on my water account, paid 2 years ago, is refunded to me based on my clean credit history.

My mailing address is: (Circle One)

1. Same as the service address

2. _____

Account# _____

Signature _____

Date _____

Please note that if there is an unpaid balance at time of refund, your deposit will first be applied to the balance owing and the remainder will be sent to you in a check.

Office Use Only:	Approved:
Deposit Date: _____	Denied: _____ Eligible Date: _____
Reviewed for delinquencies by: _____	Date: _____