City of Toledo Water Usage Tier Selection Form

Please complete the form below to indicate your preferred water usage tier for the upcoming billing period. If this form is not returned by **December 6**th **2024**, you will be automatically placed in **Tier 1**.

If you are a **resident**, you may choose any tier that suits your household's water usage. If you are a **business**, you will be automatically assigned a tier based on your meter size but can opt to move up to a higher tier (not down).

Account Information	
Name (Account Holder):	
Service Address:	
Contact Phone Number:	
Email Address (optional):	
Account Number (if known):	

Water Usage Tier Selection

Please select the tier that best matches your anticipated water usage. For more information about the water tiers and associated costs, please refer to the attached **Ordinance No. 810**.

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•	Tier 1:	6,000 gallons per bi-monthly period	
	0	Business (5/8" meter)	
	0	☐ I select Tier 1	
•	Tier 2:	10,000 gallons per bi-monthly period	
	0	Business (1" meter)	
	0	☐ I select Tier 2	
•	Tier 3:	14,000 gallons per bi-monthly period	
	0	Business (1 ½" meter)	

o □ I select **Tier 3**

Tier 4: 20,000 gallons per bi-monthly period Business (2" meter) ○ □ I select Tier 4 **Terms and Conditions** 1. If no tier is selected, the account will be automatically placed in **Tier 1**. 2. Businesses are placed in a tier based on meter size and can only opt to move up to a higher tier. 3. Residents and businesses are allowed to change their tier once per year by contacting City Hall. 4. Overages beyond your selected tier's allotment will be charged at \$10 per 1,000 gallons used. 5. Please contact City Hall if you have any questions about the tiers or your water usage. **Signature** I understand the terms and have selected the appropriate tier for my household/business water usage. Signature: _____ Date: _____

Return Options:

- Mail: City Hall, PO Box 236 Toledo WA 98591
- In Person: City Hall, 130 N 2nd St Toledo WA 98591
- Email: utilities@toledowa.us (scan and email the signed form)