



HIGHLAND CITY

Assessments/Account Information Request Form

5400 West Civic Center Drive, Suite 1, Highland, Utah 84003
Office Hours: Monday - Thursday, 7:30 a.m. - 6:00 p.m., Closed Friday
(801) 772-4523 Office • (801) 756-6903 Fax

To be completed by the homeowner or company requesting information from Highland City. Return via email candice@highlandcity.org or fax (801) 756-6903.

Date of Information Request: _____

Name of Homeowner or Account Holder: _____

Legal Address of Homeowner or Account Holder: _____

Name of Individual Requesting the Information: _____

Name of Institution that is Requesting Information: _____

Phone # _____ Email _____ Fax # _____

Reason for the Request:

_____ Selling of Property OR
_____ Refinancing (mark one line): _____ lower interest rate or _____ other reason

OFFICIAL USE BY THE CITY

City Account Number: _____ Date Request Received: _____

Special Assessments

Notice of Interest _____ \$2,125.98 due at the time of sale or refinancing for other reasons.

Account Information

Current Account Balance ** \$ _____ Due on the 20th of the month

Delinquent Account Balance \$ _____ Past due

Services

YES NO If no, Connection Fee required or paid (note: some fees have been pre-paid)

_____ _____ Garbage

_____ _____ Culinary Water

_____ _____ Pressurized Irrigation *If no,* _____ Pre-paid or _____ \$550.00 due at the time of connection

_____ _____ Pressurized Irrigation Purchase
_____ Date to be paid off (financing shares through the City)

_____ _____ City Sewer *If no,* _____ Pre-paid or _____ \$2,125.98 due at the time of sale or refinancing for other reasons*

_____ _____ Timpanogos Sewer *If no,* _____ Pre-paid or _____ \$2,475.00 due at the time of connection

_____ _____ Storm Drain

_____ _____ Open Space \$20.00 Monthly Park/Open Space Maintenance Fee

Name of Person Completing the Request: _____ Date Request Returned: _____

**CURRENT BALANCE DUE DOES NOT REFLECT A FINAL BILL.
A METER READING MUST BE REQUESTED FOR A FINAL BILL**