VILLAGE OF SMITHVILLE

for me

APPLICATION FOR WATER AND SEWER SERVICE

	Date
Full Name (To appear on bill)	
	ss#
	Spouse's Birth Date
Phone	
Name & City of Present Employer	
Name & City of Spouse's Employer	
**************************************	nant Owner
service will be discontinued for nonpaym service will be reinstated only after all bil the sum of \$25.00. A deposit of \$150.00 is In consideration of the Village of Smithvill agree to pay his/her village utility bill who Village of Smithville Board of Public Affairs	e the date set forth on the bill; and if any bill is not paid by or before that ontaining a cutoff notice that if the bill is not paid within ten days, ent. When utility service is discontinued to a customer for nonpayment ils for service then due have been paid, along with a turn-on charge in a required in order for this application to be processed. The service is agreement to provide such services, the undersigned en due and to abide by the Rules and Regulations of the separation to municipal water and sewer services.
Signature	
* * * * * * * * * * * * * * * * * * *	
Account #	Starting Date
Attach copy of identification	Deposit \$Receipt#
Date of Deposit	Cash / Money order / Check # (circle one)
For questions concerning billing contact:	Village of Smithville/Utilities Department Office 207 W. Main Street/PO 517 Smithville, OH 44677 (330) 669-2311

(330) 669-2311 Hours: Mon – Fri, 8a – 4p Closed Sat & Sun