



APPLICATION FOR WATER AND SEWER SERVICE

Date \_\_\_\_\_

Full Name (To appear on bill) \_\_\_\_\_ SS# \_\_\_\_\_

Name of Spouse \_\_\_\_\_ SS# \_\_\_\_\_

Birth Date \_\_\_\_\_ Spouse's Birth Date \_\_\_\_\_

Address (to be served) \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Name & City of Present Employer \_\_\_\_\_

Name & City of Spouse's Employer \_\_\_\_\_

Name of Landlord (if applicable) \_\_\_\_\_

Indicate your occupancy status: Tenant \_\_\_\_\_ Owner \_\_\_\_\_

All bills are due and payable on or before the date set forth on the bill; and if any bill is not paid by or before that date, a delinquent notice will be mailed containing a cutoff notice that if the bill is not paid within ten days, service will be discontinued for nonpayment. When utility service is discontinued to a customer for nonpayment service will be reinstated only after all bills for service then due have been paid, along with a turn-on charge in the sum of \$25.00. A deposit of \$150.00 is required for this application to be processed.

In consideration of the Village of Smithville's agreement to provide such services, the undersigned agree to pay his/her village utility bill when due and to abide by the Rules and Regulations of the Village of Smithville Board of Public Affairs pertaining to municipal water and sewer services.

Signature \_\_\_\_\_

\*\*\*\*\*

FOR OFFICE USE

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
Hours: Mon - Fri, 8a - 4p
Closed Sat & Sun