

SANGAMON VALLEY
PUBLIC WATER DISTRICT

Application for Water and Sewer Service

Applicant: _____ Co-Applicant: _____

Drivers License #: _____ Drivers License #: _____

SSN #: _____ SSN #: _____

Address: _____ Date you intend to move: _____

Home Phone #: _____ Work Phone #: _____

Name and Address of Current Employer:

Applicant: _____ Co-Applicant: _____

How long employed at the above listed employer: Applicant _____ Co-Applicant _____

Method of Occupancy: Own _____ Financed By: _____

*Rent _____ From Whom: _____

*Contract Purchase: _____ From Whom: _____

Title # (if the unit is a mobile home): _____

Previous Address: _____ How Long? _____

References: _____ Phone: _____

Personal

Phone: _____

Bank

Phone: _____

Credit

* \$50.00 Deposit Required

Date of Application: _____

Applicant Signature: _____ Co-Applicant Signature: _____

Owner Signature (Rental Units): _____

-----**For Office Use Only**-----

Deposit Paid: Date _____

Received by: _____

Start Meter Reading: _____

Ending Reading: _____

Turn-off Date: _____

Deposit Disposition: _____

By Whom: _____

Forwarding Address & Phone: _____