



APPLICATION FOR WATER SERVICE

City of Clinton
118 W. Washington
Clinton, IL 61727
217-935-3432

Water Acct No. _____

Sequence No. _____

Date of Application: _____ Driver's license#: _____ Service Start Date: _____

Owing

Renting

WATER SERVICE LOCATION: _____

APPLICANT

Mailing Address

Name: _____

Street: _____

City/State/Zip: _____ Telephone: _____

If renting Owners Name: _____

Renter Signature: _____

PROPERTY OWNER

Name: _____

(if same as applicant print "same")

Street: _____

City/State/Zip: _____ Telephone: _____

7-8-6-2: LIABILITY FOR CHARGES:

The owner of any lot, parcel of land or premises using or receiving waterworks services of the city, the occupant of such premises and the user of the services shall be jointly and severally liable for the payment of charges for such use and services to such lot, parcel of land or premises, and all services are rendered to the premises by the said city only on the condition that such owner, occupant and user shall be jointly and severally liable therefor to the city. (Ord. 516, 4-15-1991)

*Please read the above statement and understand what you are attesting to before you sign

Property Owner Signature: _____

For Office Use Only

\$75 Deposit Paid (if applicable)

\$50 Turn On Paid (if applicable)

Liens Paid

Date and Time of Turn On: _____ End Water Service: _____