

DATE ____/____/____

Village of Herscher

272 E. Second Street Herscher, IL 60941 (815) 426-2131

WATER / SEWER APPLICATION

Address of service request _____ Apt. # _____

Mailing address (if different from above) P.O. Box # _____, Herscher, IL 60941

Name of applicant _____

Phone # () _____ - _____ email address- _____

Date of Birth ____/____/____ Would you like your bill emailed to you _____

Landlord's name (if renting) _____

Landlord's address _____ Phone # () _____ - _____

Service activation fee must be paid in full at the time of request **prior** to service activation. Service activation fee is \$50.00. Make Checks payable to the Village of Herscher. Water service shut off to be requested 7 days **prior** to actual shut off date. It is the responsibility of the consumer to notify the Village of an account that is to be closed. Final bills are to be paid in full within two (2) weeks after service is discontinued. Any delinquent accounts not paid after final notice, the entire deposit will be forfeited to the Village. The applicant further agrees to pay any and all costs, including reasonable attorney's fees incurred by the Village of Herscher, for collecting any sum due for these reasons.

- If water service is shut off for non-payment, a \$100.00 reinstatement/reconnect fee is payable with the outstanding water/sewer bill before service is turned back on.

Signature _____ Date _____

I have read the entire application and my signature states that I understand the terms listed above and agree to these terms and all of the Village of Herscher Ordinances concerning water and sewer procedures and usage.

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To be completed by the Village Clerk

Date Service Approved _____ *By:* _____

Date Deposit Paid _____ *Amount:* _____

Deposit Transfer: Yes or NO _____ *Date transferred from* _____ *Amount* _____

Account # issued _____ *Meter Reading* _____ *Date read* _____

Date Account Closed _____ *Final Reading* _____ *Deposit Returned* _____