

# MAYWOOD

VILLAGE OF MAYWOOD • 40 MADISON STREET • MAYWOOD, ILLINOIS 60153 • (708) 344-1200

## Water & Sewer Application

Name \_\_\_\_\_ SS# \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Home # \_\_\_\_\_  
Service Address \_\_\_\_\_ # of units \_\_\_\_\_  
Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Place of Employment \_\_\_\_\_ Address \_\_\_\_\_  
Phone # \_\_\_\_\_ Do you own or rent? \_\_\_\_\_ How long at this location \_\_\_\_\_  
Landlord's Name \_\_\_\_\_ Home # \_\_\_\_\_  
Landlord's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### CREDIT HISTORY

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
How long at previous address \_\_\_\_\_ if less than 2 yrs provide previous address  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Drivers License # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Exp. Date \_\_\_\_\_ D.O.B. \_\_\_\_\_  
Nearest relative not living with you \_\_\_\_\_  
Address \_\_\_\_\_ Home # \_\_\_\_\_

### NOTE

FOR ALL DELINQUENT ACCOUNTS 60 DAYS PAST DUE, A LETTER OF NOTIFICATION WILL BE SENT TO THE LANDLORD. 90 DAYS PAST DUE WATER SERVICE WILL BE TERMINATED WITH NOTICE TO LANDLORD.

Do not write below this line - WATER DEPARTMENT USE ONLY -

Meter number \_\_\_\_\_ Size \_\_\_\_\_ Service Date \_\_\_\_\_  
Beginning read \_\_\_\_\_ Previous owner/user \_\_\_\_\_  
Ending read \_\_\_\_\_ Number of units \_\_\_\_\_  
Deposit amount \_\_\_\_\_ (Activation fee \$50.00) Total Due \_\_\_\_\_  
Account number \_\_\_\_\_ Date \_\_\_\_\_  
Water Representative \_\_\_\_\_