

Application and Service Agreement for Utility Services – Water & Sewer

Applicant Information (Please print clearly)

Name: _____

Mailing Address: _____

Service Address: _____

Telephone Number: _____ Email Address (optional): _____

Employer: _____ Work Number: _____

Date of Purchase: _____ Social Security Number (last 4) **OR** EIN: _____

Agreement Terms

As the owner or a duly authorized agent of the property listed above, the undersigned hereby applies for water and/or sewer service from the City of Springfield.

If this application is accepted and services are furnished, I agree to comply with all applicable laws, rules, regulations, and orders of the City of Springfield as they now exist or may later be amended. I further agree to allow the City to install any required meters, curb boxes, or shut-off valves at my expense in accordance with standard installation practices. I further understand that I will be charged for sanitary sewer services when they are available and stormwater when applicable.

If any bill for such services is not paid within thirty (30) days of the due date, I understand and agree that services may be discontinued without further notice. I also understand and acknowledge that when a bill remains unpaid, it may be levied upon my property. I authorize the City or its agents to enter the premises to remove utility equipment and perform necessary actions to terminate service, and I waive any claims for damages resulting from lawful disconnection.

I also agree that the City may enter upon my property, following applicable law, to access and repair shared water lines, provided that the City restores any disturbed area to its original condition.

This agreement remains in effect until the City of Springfield receives written notice from me requesting termination of service. Termination is subject to payment in full of all final charges.

By signing below, I certify that the information provided is true and correct and that I understand and agree to the terms of service.

Authorization and Signature

Signature: _____ Date: _____

Please submit this completed form in person to the City of Springfield Water Department at 76 East High Street, Springfield, OH 45502, or email to utilbill@springfieldohio.gov. For questions, call (937) 324-7351 during regular business hours.

<p>For Office Use Only:</p> <p>Cycle _____ Route _____</p> <p>Loc ID _____</p> <p>Driver's License # _____</p>

<p>Notarize Below if Not Submitted in Person</p>
