

VILLAGE OF ASHLAND

Water Service Application \* Water Disconnection \* Dog Registration

Date: \_\_\_\_\_

NAME(s): \_\_\_\_\_  
(If married please use both names)

Maiden Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Service Address: \_\_\_\_\_

Date Service Begins: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Authorizing service to begin on above date)

Date Service Ends: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Authorizing service to be terminated on above date)

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_  
Own: \_\_\_\_\_ Rent: \_\_\_\_\_

Landlord: \_\_\_\_\_

Landlord Telephone: \_\_\_\_\_

Deposit Paid: \$85.00  
(Deposit refunded after a year of on-time payments or can be credited on final bill)

Hook-up Fee Paid: \$15.00  
(non-refundable)

Total Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Account #: \_\_\_\_\_ Service ID #: \_\_\_\_\_

Date/Beginning Meter Reading: \_\_\_\_\_

Date/Ending Meter Reading: \_\_\_\_\_