



**NEW/CHANGE WATER SERVICE**

Former Owners Name, Address, Ph#: \_\_\_\_\_

New/Current Owners Name, Address, Ph#: \_\_\_\_\_

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

Water Account Number: \_\_\_\_\_

Renters Name/Billing Address/Ph#: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

**\*\* FOR NEW WATER INSTALLATION \*\***

Type of Building to Service: \_\_\_\_\_

Date Work Will Begin: \_\_\_\_\_

Date Work Completed: \_\_\_\_\_

\_\_\_\_\_  
Former Owner Signature & Date

\_\_\_\_\_  
New/Current Owner Signature & Date

\_\_\_\_\_  
Renter Signature & Date

\_\_\_\_\_  
Briley Township Representative



## WATER MAINTENANCE/SERVICE APPLICATION

Owners Name & Phone #: \_\_\_\_\_

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

Renters Name & Phone #: \_\_\_\_\_

Water Account Number: \_\_\_\_\_

Type of Service/Maintenance Performed: \_\_\_\_\_

Total Cost for Service/Maintenance: \_\_\_\_\_

Date To Turn Service On: \_\_\_\_\_

Date To Turn Service Off: \_\_\_\_\_

\_\_\_\_\_  
OWNER SIGNATURE & DATE

\_\_\_\_\_  
RENTER SIGNATURE & DATE

\_\_\_\_\_  
BRILEY TOWNSHIP REPRESENTATIVE