dauland Villance and								Office Use Only
Glenford Sewer and Water Utility Agreement								Processing CSR
P.O. Box 22 ~ 125 E. Main St. Glenford, Ohio 43739								Date Processed / / /
P: (740) 659-2009 E-mail: <u>glenfordvillage@att.net</u>								
Signed UA by Owner	Photo ID Owner Photo I							Domestic User Survey (all vercial accts.)
REQUIRED DOCUMENTS – Incomplete Applications will NOT be Processed.								
All documents should be submitted together in one submission. Do not duplicate submission.								
PROPERTY OWNER INFORMATION								
Please check one: Residential Commercial Effective Date Requested:								
Legal First Name/Business Name: MI: Last Name:								
Service Address:								
City:					State:			Zip Code:
Mailing Address(if different from service):								
City:					State:			Zip Code:
Driver's License/State	ID:	DL State:			Tax ID(business only):			
Phone:	Cell Phone:			E-mail:				
Fax: Type of Business:								
RESIDENTIAL/COMMERCIAL TENANT INFORMATION If the utility bill will be in the owner's name at the service address, please complete the tenants section below								
Please check one: Re						ate Requested:		
Legal First Name/Busi					Last Name:			
Driver's License/State	· · · · · ·	DL State:			Tax ID(business only):			
Phone:		Cell Phone:			E-mail:			
Fax: Type of Business:								
PROPERTY MANAGEMENT INFORMATION								
As the owner of the property, I authorize								
Property Management Name:								
Mailing Address:								
City: State: Zip Code								Zip Code
Phone:		E-mail:				Tax ID(busir	ness on	ly):
Fax:	Other Info:							
AGREEMENT								
Please sign the following statements as acknowledged and required by this agreement								
 I, the owner/ landlord of the property listed above am aware that it is my responsibility to keep this agreement updated, and will inform Customer Service of any changes to account information. <u>glenfordvillage@att.net</u> 								
 I, the owner/landlord of the property listed above, am aware of and agree to comply with the Sewer System Rules and Regulations <u>www.glenfordvillage.org</u> 								
 I, the owner/landlord of the property understand that if the bill is past due the Village of Glenford will file a resolution to Lien the property taxes. 								
 I, the owner/landlord of the rental property listed above, am aware that I am the responsible party for this bill. 								
 I, the owner/landlord of the rental property listed above, am aware that the bill will be sent to me and the tenant will receive a copy upon request. 								
Signature of OWNER:			Date:					
*By signing this form I and Regulations or fals *Photo ID required at t *Account changes utili	sifying information s the time of application	ubjects sewer se on for both prope	ervice t erty ow	o termination ner and acc	on and count ho	possible crir older, must b	minal pro be legib	le