

REQUEST FORM
FOR SEWAGE ACCOUNT ADJUSTMENT
DUE TO WATER SHUT OFF

I/ we _____ the owner(s)/ buyer(s)
of the property located at _____
service address

Sewage Account # _____ request that my/our account billing
be adjusted to the monthly charge of \$48.00 because of the water being shut off at this location
due to vacancy.

I/we certify that the water service to the said property has been eliminated, shut off by water
company, and no waste can be produced.

I/we understand that this agreement will only take effect when the water company verifies my
water account as a gone account and there is **no** water usage for the month being billed. If **any**
usage is reported by the water company for the month being billed, I/we will incur regular usage
charges.

I/we further certify that I/we **will notify** the Village Administrator **before** water service
is again established at this location. I/we understand that this agreement will become null and
void when water service is restored to this location.

Owner's/ Buyer's Signature _____ Date _____ Phone Number _____

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Submit to: Village of Adelphi, P.O. Box 568, Adelphi, OH 43101, Attn: Sewer Services

Date Request Received _____

Official Use Only
Date Confirmed Gone Account _____