



For Office Use Only:

Account # _____
 Service Start Date: _____
 Inspection Date : _____
 Date of Occ Cert: _____
 PIN # _____

Application for Water Department Services CITY OF MARKHAM

Required documents for Water Service:

- Proof of Ownership
- Copy of signed lease for rentals
- Copy of valid drivers license or state id

Deposits required:

Residential Meter : \$250.00
 Construction Meter: \$200.00
 Commercial: \$250.00 - \$5490.00 depending on
 the size of meter and monthly usage

Reason for Application: (Please check one)			
Property Type: Residential _____	Commercial _____	Construction _____	
Reason: Name change _____	Address Change _____	Surety Money _____	New Service: _____

Owner Information

Owner Name: _____	Spouse: _____	
Address: _____ (P.O. BOX # WILL NOT BE EXCEPTED)		
City _____	State _____	Zip Code _____
Phone #'s: Home: _____	Cell: _____	Work: _____
Employer's Name: _____	Drivers License # _____	

Service Address Information

Same as Owner; please check here: _____

Resident: _____	Spouse: _____	
Address: _____		
Phone #'s: Home: _____	Cell: _____	Work: _____
Number of total occupants: _____		

Bill-To Address Information

Same as Owner; please check here: _____

Resident: _____	Spouse: _____	
Address: _____		
City _____	State _____	Zip Code _____
Phone #'s: Home: _____	Cell: _____	Work: _____

For Office Use Only: Meter #: _____ Meter Reading: _____ Receipt #: _____ Purchased Property : _____ Rental Property: _____

Tenant Information

Tenant Name: _____ Spouse: _____ Phone #'s: Home: _____ Cell: _____ Work: _____ Tenant's Previous Address: _____ City _____ State _____ Zip Code _____ Spouse Phone #'s: Cell: _____ Work: _____ Social Security # _____ Drivers License # _____ Employer's Name: _____

PLEASE READ CAREFULLY

Owner agrees to pay all charges in full upon receipt of CITY OF MARKHAM Bill(s) or other advice(s) of amounts due. In the event Collection action by the CITY OF MARKHAM is necessary, owner agrees to pay all costs, expenses, and attorney fees resulting from such action.

Owner's Signature _____ **Date** _____

Please print; Owner's Name: _____

Authorized Signature: _____ **Date** _____

Authorized Signature's Title: _____

- **All Surety Meter refunds are payable after payment of all final bills.**

NOTICE TO ALL LANDLORDS

- **All outstanding bills and/or penalties are the responsibility of the owner.**

**We are committed to providing the highest level of customer satisfaction possible.
Thank you for your patronage; we look forward to serving you.**