

Municipal Water Service Application

Acct. No: _____

Type of Reading: _____

Reading: _____

Date Wanted: _____

Name: _____ Middle Initial: _____ Spouse: _____

Address: _____

Mailing Address: _____

If different from above address.

Social Security No: _____ Driver's License No: _____

Phone : _____ Employer: _____

Spouse Employer: _____

Owner: _____ Reconnect: _____ Disconnect: _____

Is Applicant currently indebted to the Village of Mt. Zion
for past water services? _____

STATE OF ILLINOIS)
) SS.
COUNTY OF MACON)

AFFIDAVIT

The above named affiant, after first being duly sworn upon his/her/their oath, does depose and state that the above information provided on the Application for Municipal water/sewer service is true and accurate. Further, applicant states that he/she/they is not indebted to the Village of Mt. Zion for past municipal water/sewer services, even if at a different location and even if under a different name. Further, affiant does state that he/she/they resides in the above described premises for which water services are being applied, and that the same shall be his/her/their domicile and permanent residence. Further, affiant states the he/she/they will not allow person(s) to live at the residence who are currently indebted to the Village of Mt. Zion for past municipal water/sewer services or they will thereby become legally responsible for the outstanding bill. Finally, affiant does state that he/she/they is applying for municipal water/sewer services in good faith, and that the application is not being made in lieu of or on behalf of another person or persons who will also be residing at the above described address and who has an outstanding, delinquent water/sewer service account with the Village of Mt. Zion.

In Making this statement, affiant acknowledges and understands that the same is under oath, and , as such, is subject to punishment by the laws of the State of Illinois including, but not necessarily limited to, the offences of perjury.

Signed: _____

Date: _____

