

# VILLAGE OF MAPLE PARK FINAL WATER READING REQUEST

Today's Date:	
Property Address:	
Send Final Bill to:	Name:
	Address:
	City/State/Zip:
Phone Number:	
Billing Account #:	
Date of Final Read:	
Final Reading:	
New Owner/Tenant Name:	<input type="checkbox"/> New Owner <input type="checkbox"/> New Tenant
Send Bill to:	
New Owner Phone:	

## EMERGENCY NOTIFICATION SYSTEM SIGN UP

<b>I would like to get notifications via:</b> (check all that apply)
Name: _____ Address: _____
<input type="checkbox"/> Phone call: _____ phone number <input type="checkbox"/> Text message: _____ phone number <input type="checkbox"/> Email: _____ email address
Name: _____ Address: _____
<input type="checkbox"/> Phone call: _____ phone number <input type="checkbox"/> Text message: _____ phone number <input type="checkbox"/> Email: _____ email address