

Council:Ariel Isaacs
Dottie Scott
Krissy KaufTina Killion
Tom Dilgard
Betty Brown**Mayor:**

John R. Benshoff

Fiscal Officer:

Leighanna Cawrse



822 Main Street • Ashland, Ohio 44805 • (419) 922-4063

Application for Water / Sewer Service

Residential ☐Business ☐

(Please indicate which service you are applying for)

Property/Home Owner Information

Name _____

Address _____

City / State / Zip _____

Home Phone _____ Cell _____

Service Address _____

Will you reside at the service residence?

Yes ☐No ☐ (if no, please complete tenant info below)

Tenant Information

Name _____

Home Phone _____ Cell _____

*Billing: ☐ Paperless ☐ Paper Copy ☐ BothNewsletter: ☐ Paperless ☐ Paper Copy ☐ Both

*** By signing this application, I understand that I am responsible for all water / sewer services rendered to the above service address listed until such time the property has been sold. ***

Date _____ Name of Applicant (print) _____

Signature of Applicant _____

*For our customers who are leasing a residence, bills will remain in the property owner's name. However, tenants may request that a copy of the bill be sent to their address, or can view and download the bill online at <https://baileylakes.ohiobillpay.com/> using the account number and landlord's last name.

For water/sewer emergencies after 4 p.m. please call (330) 388-4218.
For billing questions during business hours (8 a.m. to 4 p.m.), please call (419) 922-4063.

For Office Use Only:

Account Number _____ Meter Number _____

☐

New

☐

Existing