

VILLAGE OF UNIONVILLE

GATEWAY TO THE THUMB

6454 MERRY ST.

UNIONVILLE, MI 48767

(989) 674-2244 FAX (989) 607-6621

"THIS INSTITUTION IS AN EQUAL OPPORTUNITY PROVIDER AND EMPLOYER"

www.unionvillemi.us

TERMINATION OF RESPONSIBLE PARTY FORM WATER, SEWER AND TRASH SERVICES

SERVICE ADDRESS: _____

NAME OF OCCUPANT: _____ PHONE NUMBER: _____

FORWARDING ADDRESS OF OCCUPANT: _____

EFFECTIVE DATES OF LEASE: _____

NAME OF OWNER: _____ PHONE NUMBER: _____

MAILING ADDRESS OF OWNER: _____

NOTE: The occupant is responsible for all utilities until the final read date requested by the occupant and owner. The owner is responsible for any charges following the final read date. Contact the Village Clerk at least two weeks in advance to schedule a final read date.

PLEASE NOTE: The deposit will be held until a request of termination has been made by the owner and occupant. Termination of the account must be verified by the owner before the Village may close the account. The deposit will then be applied to the final bill and any refund will be sent to the provided forwarding address within 30 days.

OCCUPANT SIGNATURE: _____ DATE: _____

OWNER SIGNATURE: _____ DATE: _____

CLERK SIGNATURE: _____ DATE: _____

For Office Use Only

Account Number: _____ Date Return Deposit Mailed: _____

Amount of Final Bill: _____ Check Number: _____

Amount of Return Deposit: _____