



# Village of Sugar Grove, Ohio

BOARD OF PUBLIC AFFAIRS  
101 BRIDGE STREET, PO BOX 7  
SUGAR GROVE, OH 43155



## APPLICATION FOR UTILITIES SERVICES

**\*PLEASE PRINT LEGIBLY. NOTICE: APPLICANT MUST SHOW PHOTO ID OR OTHER FORM OF ID\***

Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Applicant's Previous Address: \_\_\_\_\_

Location of New Service: \_\_\_\_\_ P.O. BOX \_\_\_\_\_

Beginning Date: \_\_\_\_\_ Do you Own or Rent? \_\_\_\_\_

Billing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Services for which you are applying:

- Water (metered) "WA1"
- Sewer (metered) "SEW"
- Refuse/Trash (unmetered) "RFR" **\*\*ALL RESIDENTIAL PROPERTIES WITHIN VILLAGE LIMITS MUST HAVE "RFR"**
- Water Repair/Improvement "WA2" **\*\*\*ALL CONNECTIONS MUST HAVE "WA2" ASSESSED, INCLUDING VACANT LOTS**

Have you previously held an account with the Village of Sugar Grove Utilities? \_\_\_\_ YES \_\_\_\_ NO

If "YES," what address? \_\_\_\_\_

### IN CONSIDERATION OF RECEIVING VILLAGE UTILITY SERVICES, YOU, THE SIGNER, AGREE TO THE FOLLOWING:

1. All utility bills are due and payable by the 15<sup>th</sup> of each month. Alleged failure to receive bills will not constitute an excuse for non-payment. No reduction in late fees or penalty will be made unless the customer can demonstrate to the satisfaction of the Village that failing to receive the bill was at the fault of the Village.
2. Non-payment of bills when due may result in disconnection of service. The Village of Sugar Grove has the right to discontinue utility services or refuse to furnish the same for non-payment for any utility bill owed, fraudulent or illegal diversions of services, and for any other reasons allowable by rules and regulations set forth in the Ordinances of the Village of Sugar Grove.
3. That in the case where I am purchasing a property, an unpaid bill created by the former owner must be paid in full before the utilities will be transferred, and that certain charges, if not paid, can and will be certified to the County Auditor for addition to the property tax, which I will have to pay.
4. That if I, my spouse, my tenant, or any other member of my household owes the Village of Sugar Grove any past due, delinquent bills of any type, they must be paid in full before any service will be provided. If such service is provided and it is found out that such bills do exist, service may be disconnected at once until the bill has been paid in full.

I, the undersigned, hereby apply for utility service(s) for the above service address, and agree to abide by the rules of the Village of Sugar Grove Utilities Ordinances and Fee Schedules which are available for review upon request. I further certify that, to the best of my knowledge, I have no outstanding balance owed on a previous Village of Sugar Grove account.

**WARNING: Making false statements on the application for utilities service may be punishable by law**

APPLICANT Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PROPERTY OWNER(S) Printed Name: \_\_\_\_\_

PROPERTY OWNER Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PROPERTY OWNER MAILING ADDRESS (IF DIFFERENT FROM SERVICE ADDRESS): \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b> Application Reviewed By: _____ Approved: ____/____/____ ACCT # _____ ID PROVIDED: _____ MOVE-IN: ____/____/____ OUT: ____/____/____
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