

**APPLICATION for WATER CONNECTION
VILLAGE of ALBERS, ILLINOIS**

Albers Village Hall
206 W. Dwight - PO Box 132
Albers, IL 62215-0132
(618) 248-5154

Date _____

Name of Applicant _____

Address _____

Phone # _____

E-Mail _____

Name of Owner _____

- () I (We), the undersigned, do hereby make application to the Village of Albers, Illinois, for water and sewer service, and agree to abide by all ordinances, rules, and regulations of said Village as they pertain to the Water System
- () I (We) agree to pay a \$150.00 Tenant Water Deposit for service. (Ordinance #563)

Signature of Applicant _____

- () I (We), the undersigned agree that I (We) are liable for any and all fees unpaid by the above applicant.

Signature of Owner _____

Application Approved _____, 20____

Deposit Paid _____

Water Superintendent / Village Official _____

For Office Use: Meter Reading _____

 Meter Reading Date _____