

CITY OF MANSFIELD, OHIO

Jodie A. Perry, Mayor

UTILITY COLLECTIONS DIVISION 99 Park Avenue East Mansfield Ohio 44902 Phone: 419-755-9670 Fax: 419-755-9414

CITY OF MANSFIELD UTILITY COLLECTIONS

Application for Water / Sewer Service for New Owner

	Residential Business Realtor
	(Please indicate which service you are applying for)
	Land Owner Information
Closing Date	Account Number
Name	
Address	
City / State / Zip	
Home Phone	Cell
Social Security Number	
Service Address	
	Will you reside at the service residence? Yes No
	Employment Information
Employer	
Address	
City / State / Zip	
	Work Number
	ion, I understand that I am responsible for all water / sewer services rendered to the above I such time the property has been sold. ***
Date	Name of Applicant (print)
Signature of Applicant _	
Offic	e Info: Final Meter Yes No