

LAWRENCEVILLE WATER AND SEWER DEPARTMENT
6 MECHANIC STREET
LAWRENCEVILLE, PA 16929
570-827-3259

APPLICATION FOR WATER/SEWER SERVICES

AND NOW, this _____ day of _____, 20____ application for water and sewer services is made for the property located at:

Property Address

Lawrenceville Borough, Tioga County, Pennsylvania.

This application is made by:

Applicant

Applicant

Lessee Owner (of said property)

The required deposit of \$150.00 must accompany this application.

It is agreed between the person(s) making this application that said application is made subject to the approval of the Lawrenceville Water and Sewer Department, and that the services furnished by the Department are made in compliance with the applicable Borough Ordinances and that the person(s) making this application hereby agree(s) to abide by the terms and conditions of the applicable Borough Ordinances.

If a Lessee makes the application, the Lessee shall provide the name and address of the property owner. Tenants will make the required payment for services furnished by the LWSD, and should the tenant fail to do so, the LWSD may look to the property owner(s) for payment of the total outstanding balance.

A late fee of 10% is added after the due date. It is also understood by the Lessee/Property Owner(s), that any balance that is outstanding at the end of a 45-day period will constitute a default and services may be disconnected. Restoration of services can be made with payment in full of the delinquent amount and applicable fees including an additional \$50.00 fee for service restoration.

In the event that payment of a delinquent account is not made within 60 days, the LWSD may turn the account over to our solicitor for collection. A collection fee plus legal fees will be added to the balance to cover the cost of recovery.

IN WITNESS WHEREOF, the proper signatures below are made:

LESSEE (S)

PROPERTY OWNER (S)

Signature Date

Signature Date

Signature Date

Signature Date

Signature Date

Signature Date

Mailing Address (if different from above)

Mailing Address

City, State, Zip

City, State, Zip

Phone Number

Phone Number

DRIVER'S LICENSE #

OR

BUSINESS TAX ID #

Approved by: _____

Date: _____

Lawrenceville Water and Sewer Department