

## WATER APPLICATION (RENTAL)

Name of Renter:			
Property Address			Phone:
Previous Address:			
Last 4 Digits SS #:	# of People in	n Home:	DOB
Driver's License #:			_State
Landlord Information:			
Name:			_Phone
Address:			
responsibility for water/sew			of Romeoville and I/We now assume ress.  Date
•		Your	Garbage Day is:
Note: A Deposit of	\$100 shall be required	d for all rente	ers applying for water service
Deposit Paid \$	Date:		Rec'd by:
OFFICE USE ONLY:			
Account Number:	Date of Lease:		
Final Reading:	Date Taken:		

Return completed application in person to:
 Village of Romeoville
 Attention: Water Billing
 1050 West Romeo Road
 Romeoville, IL 60446
 (815) 886-7200