

## VILLAGE OF ALMONT- SERVICE REQUEST FORM

817 N. Main St. Almont, MI 48003 Office Hours: Monday-Thursday 7:00am-5:00pm

Phone: 810-798-8528 Email: ppardo@almontvillage.org

Customer information:  Name:  Service Address:  Billing Address:  State:		Email: PO Box:							
					Please check one: ☐ New	☐ Existing	□ Owner	☐ Renter	☐ Property Transfer
					Please select the service you	Effective Date:			
					☐ Final Read (24 hour notice req	uired) 🗆 Wa	ter Shut off /on(25	5.00 fee)	Enroll for paperless billing
					☐ Pull Meter (100.00 fee)	Pull Meter (100.00 fee)   Reinstall Meter (100.00 fee)   un-enroll for paperless			
□Change Billing address:									
□Change Email address:									
□ Name Change:									
EMAIL ADDRESS IS REQUIRED I TEN DAYS	FOR FINAL WATE	R BILL. PAYMEN	NT FOR FINAL V	VATER BILL IS DUE WITHIN					
If Final read, please provide:									
Name of New Occupant:	New Occupant Telephone #								
Please read and acknowledge this importerms and Conditions: By completing the				nont Utility Bill electronically and will					
not be receiving a bill by mail. You have th	_	_	-						
Once enrolled in the electronic e-bill progra	m, you are responsible	for ensuring receipt o	f email. The Village o	of Almont will email your statement to					
the address you provide and if you fail to re	-	_	_						
provide you with accurate billing information			o your email accou	nt.					
Email Address:									
Signature of Requestor/owner:		1	Data:						
requestor/owner.			Date						
		OFFICE USE ONLY		1					
□Village Office	☐ Townshi	p Office	☐ Assessor's	Office   DDA Office					