ERIE WATER WORKS
ACCOUNT INFORMATION REQUEST FORM

Please email your request to: csinfo@eriewaterworks.org
Allow up to 5 business days for processing

Requested by: _____ Date: _____

Business / Firm Name: _____

Phone: _____ Fax: _____

Email address: _____

SERVICE ADDRESS: _____

Current Owner: _____

WATER	SEWER
CID:_____ **LID:** _____	**CID:** _____ **LID:** _____
Account(s): Active: Inactive:	Active: Inactive:
Current Quarter 1 2 3 4	Current-Quarter 1 2 3 4
Last Meter Reading Date:_____	Last Meter Reading Date:_____
	Flat Rate Charges: _____
Last Bill Amount Paid	**Last Bill Amount** Paid
$_____ Open	$_____ Open
TOTAL DUE FOR WATER $ _____	**TOTAL DUE FOR SEWER $** _____
NOTE: This amount includes a $25.00 Account Certification Fee	

FINAL READING / BILL ORDERED?   YES   NO
IF MARKED "NO" PLEASE ORDER A FINAL READING PRIOR TO THE CLOSING.

REFUSE	
CID: _____	**LID:** _____
Account(s): Active: Inactive:	
Current Quarter 1 2 3 4	Last Bill Amount: $ _____
Quarterly Flat Rate Charges: _____	Paid Open
TOTAL DUE FOR REFUSE $ _____	

BANKRUPTCY	LIEN	FIRELINE ACCOUNT
CID:_____	**CID:**_____	**CID:**_____
LID:_____	**LID:**_____	**LID:**_____
Account is:	Account is:	Account is:
Active: Inactive:	Active: Inactive:	Active: Inactive:
Amount owed: $_____	Amount owed: $_____	Amount owed: $_____
CID:_____	**CID:**_____	**CID:**_____
LID:_____	**LID:**_____	**LID:**_____
Account is:	Account is:	Account is:
Active: Inactive:	Active: Inactive:	Active: Inactive:
Amount owed: $_____	Amount owed: $_____	Amount owed: $_____

SPECIAL NOTES: _____

ERIE WATER WORKS 814/870-8000 EXT 71   **COMPLETED BY:** _____   **DATE:** _____