THE VILLAGE OF MOUNT ORAB

APPLICATION FOR UTILITIES

SERVICE ADDRESS_____

Billing Address(if different than service address)_____

*Account #(Assigned by Clerk)*_____

Name_____Spouse Name_____

Phone #_____Cell #_____ Email_____

Employer_____ Employer Address_____Phone #_____

Social Security #_____Closing/Move in Date_____
*Your SS# is required because services are provided in advance of billing which occurs after the service has been provided.

Owner ☐ or Renter☐   Business☐ or Residence☐   Number of Persons in this Home_____

Names of all residents over 18_____

Have you previously lived in the Village of Mt. Orab?   YES/NO_____

If yes, prior service address:_____
*If it is determined that you, your spouse, anyone on your lease, any company which you own, or anyone who shares ownership with you, have an unpaid Mt. Orab utility bill, the unpaid bill must be paid in full for service at the requested address.

Would you like to receive an E- Bill ☐or Paper Bill ☐   Would you like to sign up for ACH Direct?_____

In consideration of receiving Village Service, you the signer acknowledge that all the information provided on this application is true, accurate and are responsible for the following:

1. All utility bills are due and payable by the 5th of each month. Failure to receive bills will not constitute excuse for non-payment. Penalties and late fees will NOT be waived for any reason.
2. Non-payment of bills when due will result in disconnection of service. A $40.00 shut off fee will be assessed at that time.
3. The Village of Mt. Orab has a contract through Rumpke for all refuse. Refuse charges will not be waived for any reason. All Rumpke containers are to remain at the property where issued. Containers are the property of Rumpke and are issued to you by rental agreement only. They may not be purchased.
4. Termination of service: Applicant is responsible for contacting the Village of Mt. Orab in person or by phone a minimum of 24 hours in advance of vacating the property. Applicant is responsible for all charges for services provided to the premises until notice has been given to the Village and final readings have been completed.

Signature_____ Date_____

211 South High Street, P. O. Box 466, Mount Orab, Ohio 45154 (937) 444-4141