

Account #:	
Date Received: _	
Received By:	

Property Owner Utility Services Continuation Form

Property Owner Name:	
Rental Address:	
Owner Address:	
Contact Information:	
Personal Phone #:	Email:
Social Security Number:	Email: Driver's License Number:
Village of Watkins Glen Services	at Rental Property (check all that apply):
Electric: Security Lighting:	Water: Sewer:
Would Like Copies of Tenant's (c	heck all that apply):
Utility Bills: Shut Off Notice	s:
If there are any changes in the above cus the Village of Watkins Glen Office as soo	stomer information it is the property owner's responsibility to contact on as possible.
the tenant in whose name the services has regulations prescribed by the Trustees of the the established rates. The undersigned furth will continue to be responsible until such ti	e above utility services addressed to them upon termination for service by ad currently been under. The undersigned hereby agrees to observe the e Village of Watkins Glen relative to the use of the said utilities and to pay her agrees to assume responsibility for bills rendered for said services and me as the Village of Watkins Glen receives a signed application and proof agrees to see that these requirements are met and that no transfer will
I authorize the Village of Watkins Gler termination notice from the undersigned	n to continue this practice until such time as they receive a written.
Property Owner Signature:	Date:
***********	*****************
	For Office Use Only
Transfer Fee:	Amount:
Proof of Ownership:	Request completed on: