

Dear New Customer:

Please complete, sign, and return the following application along with a copy of your valid **photo ID**. If your home is within the Town Limits and has our water service you will need to pay a \$100.00 water meter deposit before the water service will be turned on. Please make sure that the ID is legible as a fax/copy machine may darken the information and make it hard to read. Please return as soon as possible for processing.

Thank you,

**Jeanette Combs**

Clerk Treasurer

**Town of Wolcottville**

PO Box 325

104 W Race Street

Wolcottville, IN 46795

Phone: 260-854-3151

Fax: 260-854-9215

Email: [townofwolcottville@embarqmail.com](mailto:townofwolcottville@embarqmail.com)

Town of Wolcottville Utility Application/Update Form  
TOWN OF WOLCOTTVILLE  
PO BOX 325 104 W RACE STREET  
WOLCOTTVILLE, IN 46795  
PHONE: (260)854-3151 FAX: (260)854-9215

Identification required

New Owner   
Update

Date \_\_\_\_\_

Customer Name : \_\_\_\_\_

Service Address: \_\_\_\_\_

Customer Mailing Address

\_\_\_\_\_

\*Home Phone (required): \_\_\_\_\_ Cell/Business Phone \_\_\_\_\_

This service address will receive the following services and charges (If you live within the Town limits you will receive Hydrant and Trash removal services. You may also receive Water Service if you are connected to our Water Service lines in Town...some properties do have water wells. If you will live outside of Town limits we will only be providing you with Wastewater services):

Wastewater\_\_\_ Water\_\_\_ Hydrant\_\_\_ Trash removal\_\_\_

Purchased from: \_\_\_\_\_

Former owner account # (office use) \_\_\_\_\_

Closing date: \_\_\_\_\_

Transfer date: \_\_\_\_\_

**Owner Authorization**

As owner of the property I understand that any account for metered water, wastewater, sanitation, and hydrant service will be issued in my name until such time as an official notice of sale is received. I understand that it is my responsibility to make notification to the utility department of the Town of Wolcottville of sale of the property or a change in the mailing address and/or billing address.

**Owner Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**For office use only:**

Parcel # \_\_\_\_\_ Deed record # \_\_\_\_\_ Route# \_\_\_\_\_  
Sequence # \_\_\_\_\_ Book Town only # \_\_\_\_\_ Town \_\_\_\_\_/Phase \_\_\_\_\_