

Water/Sewer/Refuse Service Application

Village of Shorewood
One Towne Center Blvd.
Shorewood, IL 60404
Phone (815)207-4631 • Fax (815)741-7715



SERVICE ADDRESS: _____

OWNER:

Closing Date _____

Owner's Name (Please Print) _____

Owner's Bill To Address (if different) _____

Home Phone _____ Cell Phone _____ E-mail _____

RENTER:

Move in Date _____

Renter's Name (Please Print) _____

Renter's Bill To Address (if different) _____

Home Phone _____ Cell Phone _____ E-Mail _____

Applicant's Previous Address (only if in Village) _____

(Renter must also provide owner information)

I agree to pay all bills and service charges in accordance with Village Ordinances. I guarantee that the above information is complete and correct to the best of my knowledge.

Signature _____ Date _____

This form can be e-mailed to ahale@vil.shorewood.il.us or delivered or faxed to:

Shorewood Municipal Utilities
One Towne Center Blvd.
Shorewood, IL 60404
Phone – (815)207-4631 / Fax – (815)741-7715