

**CITY OF SOUTH LEBANON, OHIO**  
**10 N. High Street**  
**South Lebanon, OH 45065**  
**Ph. (513) 494-2296**

**USER APPLICATION FOR WATER SERVICE**

ACCOUNT NO: \_\_\_\_\_ DATE: \_\_\_\_\_

NAME(S) OF APPLICANT(S): \_\_\_\_\_  
\_\_\_\_\_

DRIVER LICENSE NO.: \_\_\_\_\_ SOCIAL SECURITY NO.: \_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_\_ CELLULAR: (\_\_\_\_) \_\_\_\_\_

DO YOU RENT OR OWN THE PROPERTY? \_\_\_\_\_ RENT \_\_\_\_\_ OWN

LANDLORD / PROPERTY OWNER NAME: \_\_\_\_\_

LANDLORD / PROPERTY OWNER ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_\_ CELLULAR: (\_\_\_\_) \_\_\_\_\_

ADDRESS WHERE SERVICE IS REQUIRED: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

WILL SOMEONE BE HOME FOR WATER TURN-ON: \_\_\_\_\_ YES \_\_\_\_\_ NO

IF NO, PROVIDE SIGNATURE BELOW INDICATING YOUR AGREEMENT TO ACCEPT RESONSIBILITY FOR ANY WATER DAMAGE THAT MAY OCCUR IF SOMEONE IS NOT HOME AT THE TIME THE WATER IS TURNED ON.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SECURITY DEPOSIT PAID: \_\_\_\_\_ METER SIZE: \_\_\_\_\_

DATE SERVICE STARTED: \_\_\_\_\_ DATE SERVICE ENDED: \_\_\_\_\_

FORWARDING ADDRESS OF APPLICANT UPON REQUEST TO DISCONTIUE SERVICE: \_\_\_\_\_  
\_\_\_\_\_

DEPOSIT REFUNDED: DATE: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

REMARKS (if any): \_\_\_\_\_  
\_\_\_\_\_

**The undersigned Applicant(s) certify that I/We shall be responsible for payment of all bills with respect to above requested water service until notification to discontinue service is received by the City of South Lebanon. Discontinuing service must be requested in writing and delivered to the City of South Lebanon at the address listed above. If all user bills owed to the City of South Lebanon have not been paid, then the security deposit will be applied to the unpaid balance. Any unpaid balance in excess of the security deposit shall remain the sole responsibility of Applicant(s). In the event Applicant(s) fails to satisfy the unpaid balance in full, and the City of South Lebanon institutes legal proceedings to collect the unpaid balance, Applicant(s) shall indemnify the City of South Lebanon for all court costs and expenses relating thereto, including reasonable attorney fees. The undersigned Applicant(s) acknowledge and understand that any refund due from the security deposit as provided herein shall be refunded only to the person(s) whose name(s) appear on the account when service is discontinued, provided the amount is greater than \$3.00. When the account is registered in two or more names, any refund of the security deposit as provided herein will be payable jointly.**

**The undersigned Applicant(s) certify that I/We have received a complete copy of the City of South Lebanon Ordinance No 2016-04 [Water Service Rules & Regulations], which are incorporated herein and made a part hereof, and water service to the address listed above is subject to such Rules and Regulations.**

DATE: \_\_\_\_\_ APPLICANT'S SIGNATURE(S): \_\_\_\_\_

DATE: \_\_\_\_\_

EMAIL: \_\_\_\_\_