



City of
BRAIDWOOD

141 West Main Street, Braidwood, IL 60408 • PHONE (815) 458-2333 • FAX (815) 458-6074 • www.braidwood.us

Rental Water/Sewer/Garbage Service Application

SERVICE ADDRESS: _____

OWNER:

Owner's Name (Please Print): _____

Owner's Bill to Address (*if different*): _____

Home Phone: _____ Cell Phone: _____ Email: _____

AS THE PROPERTY OWNER, I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR PAYMENT OF THIS WATER/SEWER/GARBAGE BILL. AS A COURTESY, THE CITY OF BRAIDWOOD WILL SEND A COPY OF THE BILL TO THE OCCUPANT. HOWEVER, SHOULD THE BILL BECOME DELINQUENT, THE WATER WILL BE SHUT OFF AND I, AS THE PROPERTY OWNER, WILL BE LIABLE FOR THE DELINQUENT BILL.

Owner's Signature: _____

Date: _____

RENTER:

Move-In Date: _____

Renter's Name (Please Print) : _____

Renter's Bill to Address (*if different*): _____

Home Phone: _____ Cell Phone: _____ Email: _____

Applicant's Previous Address (*only if in Braidwood*): _____

AS THE OCCUPANT I UNDERSTAND THAT THE CITY OF BRAIDWOOD IS ONLY OBLIGATED TO THE PROPERTY OWNER AND WILL HONOR ANY REQUEST MADE BY OWNER TO TERMINATE WATER/SEWER/GARBAGE SERVICES.

Renter's Signature: _____

Date: _____

(Renter must also provide owner information)

*****A PHOTO ID IS REQUIRED FROM EACH OCCUPANT**

This form can be e-mailed to water@braidwood.us or delivered or faxed to:

City of Braidwood
141 W. Main St.
Braidwood, IL 60408
Phone (815) 458-2333 or Fax (815) 458-6074