



CITY OF EAST MOLINE

Water Department

utilitybilling@eastmoline.com

915 16th Avenue, East Moline, IL 61244

Account # _____

Service Address: _____

Closing Date: _____ Add Recycling (Add'l Fee): _____

If renter/tenant, this form is not applicable.

Owner Information

Please Print

Name: _____

Mailing Address (if different from Service Address):

City/State/Zip: _____

Phone #: _____

Email: _____

SSN: _____

Signature _____

Date: _____

Spouse/Co-Owner Information

Please Print

Name: _____

Mailing Address (if different from Service Address):

City/State/Zip: _____

Phone #: _____

Email: _____

SSN: _____

Signature _____

Date: _____

As the owner of the above listed premises, it is specifically agreed that if these premises are rented or leased to another party, the owner shall remain jointly and severally liable with the occupant for the payment of water and sewer services. The owner hereby acknowledges said liability and his responsibility to make his own arrangements with the occupant to assure reimbursement to the owner of any sums paid by the owner to the city on behalf of the occupant.

This application and acceptance thereof by the City of East Moline shall constitute a contract and shall be subject to all ordinances and regulations now in force or that may hereafter be adopted by the city of East Moline for the government of the East Moline Water Department while this contract is in effect.