



For Office Use Only:	
Account Number	
Photo ID	
2 nd ID	

Utility Service Application – Owner(s)

Please complete this application and e-mail it to utilities@goplainfield.com within 30 days of your closing date.

Service Address _____ Closing Date _____

This property will be: Owner Occupied Rental Property Other _____

Owner Name _____

Phone _____ Date of Birth _____

Co-Owner Name _____

Phone _____ Date of Birth _____

Bill to Address (if different) _____

E-mail Address _____ Check here to receive weekly e-mail updates.

Previous Address _____

Number of Years at Previous Address _____ Number of Household Members _____

Employer _____ Employer Phone _____

Employer Address _____

I hereby make application for water/sewer/scavenger service at the address indicated above. I agree to pay all bills and service charges in accordance with Village Ordinances. I know it is my responsibility to settle my account before I leave this property. I guarantee that the above information is complete and correct to the best of my knowledge. I give the Village permission to verify any of the above information.

Signature _____ Date _____

Signature _____ Date _____

If you have any questions, please call (815) 439-4250 or e-mail utilities@goplainfield.com.