

# CITY OF YOUNGSTOWN



## WATER DEPARTMENT

CITY HALL • 26 S. PHELPS STREET • YOUNGSTOWN, OHIO 44503

PHONE: (330) 742-8746 • FAX: (330) 742-8751

[www.youngstownohio.gov/water](http://www.youngstownohio.gov/water)

Email: [youngstownwater@YoungstownOhio.gov](mailto:youngstownwater@YoungstownOhio.gov)

## APPLY FOR NEW SERVICE REQUEST

Want to establish service at your new property?

(Please allow up to 4 business days to process request)

**THE YOUNGSTOWN WATER DEPARTMENT RESERVES THE RIGHT TO DENY ANY REQUEST BASED ON PRIOR DELINQUENT BALANCES AND/OR INCOMPLETE DOCUMENTATION.**

Name \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Mailing Address (if different): \_\_\_\_\_  
Contact Phone #: \_\_\_\_\_  
Social Security or EIN #: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**\*\*\*MUST PROVIDE ONE OF THE FOLLOWING OPTIONS BELOW\*\*\***

- A. **IF YOU ARE RENTING THE PROPERTY**...we need a copy of your **STATE OR GOVERNMENT ID AND A LEASE AGREEMENT OR NOTARIZED LETTER THAT INCLUDES THE FOLLOWING: Landlord and Tenant Names, Service Address, Dates of the Lease, and Signatures of all parties.**
- B. **IF YOU ARE PURCHASING THE PROPERTY**...we need a copy of your **STATE OR GOVERNMENT ID AND A SETTLEMENT STATEMENT OR RECORDED DEED THAT INCLUDES THE FOLLOWING: Your Name and Address of Property.**
- C. **IF YOU ARE PURCHASING THE PROPERTY VIA LAND CONTRACT**...we need a copy of your **STATE OR GOVERNMENT ID AND A LAND CONTRACT DOCUMENT THAT INCLUDES THE FOLLOWING: Buyer and Seller Names, Address of Property, Dates and Signatures of all Parties.**

***By agreeing and signing below, you acknowledge that The Division of Water, City of Youngstown is not responsible for any water damages to the property. If excavation is needed, water may not be reconnected for at least 3 business days excluding weekends and holidays. This is pursuant to the Ohio Revised Code Section 3781.25 to Section 3781.32. For any water needing to be turned on, there is a non-refundable turn fee which will be billed to your water account.***

I AGREE \_\_\_\_\_

Customer Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

**If printing and mailing this request, please fill out and return (ALONG WITH THE APPROPRIATE DOCUMENTATION) to:**

Youngstown Water Department  
26 S. Phelps St. Youngstown, Ohio 44503