CITY OF YOUNGSTOWN

WATER DEPARTMENT

CITY HALL • 26 S. PHELPS STREET • YOUNGSTOWN, OHIO 44503 PHONE: (330) 742-8749

www.youngstownohio.gov/water

Email: youngstownwater@YoungstownOhio.gov



LANDLORD RE-ESTABLISH SERVICE FORM REQUEST

If you are the **property owner of record** with the Youngstown Water Department and are requesting the water account be placed into your name to avoid disconnection of service or to have service restored please **Complete this Form** along with **A Copy of your STATE OR GOVERNMENT ID**.

(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.

Select Service Type:	□ Residential	⊔ Indust	riai 🗆 Co	mmercial/in	stitutional
	☐ Residential v	with Sprink	ler System	/Well/Cister	'n
Name:					
Service Address:					
Mailing Address (if o	different):				
Contact Phone #:					
Driver's License #: _					
Service Start Date:		/			
Email Address:					
By agreeing and signing responsible for any wate for at least 3 business da Section 3781.25 to Section fee which will be billed to	r damages to the property of t	roperty. If exc nds and holid <u>water needin</u> nt.	avation is ned lays. This is pu g to be turned	eded, water ma ursuant to the O <u>d on, there is a I</u>	y not be reconnected Ohio Revised Code
[J I AGRI	EECustomer S	ionature		/////	