

Village of River Forest Application for Water and Sewer Service (PLEASE PRINT)

Seller's E-mail:

SERVICE ADDRESS: _____

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SALE OF PROPERTY:	
Actual Closing Date:	
Seller's Name:	
Forwarding Address:	
	-
Forwarding Phone No.:	

NOTE: UTILITY BILLS MUST BE PAID IN FULL BEFORE TRANSFER STAMPS WILL BE RELEASED

NEW PROPERTY OWNER/TENANT:						
Name:	Email					
Last four digits only of C	Government I	ssued ID:	Issuing Agency	y:(State or Other Govt.)		
Type of Identification Used: WE WILL NEED COPY OF ID						
			lentification Card	Passport		
Oth	er (Explain) _					
Is this property (check or	ne):	Primary R	esidence F	Rental Address*		
RENTAL PROPERT	X 7.					
KENIAL PROPERI	Y :					
Party to be billed (check	(one):	Owner	Tenant*			
*Tenant's Name			Phone No.			
(Tenant must fill out Identification information above and supply us with a copy of their ID)						
Owner Information:						
Name c/o		Address				
City	_ State	_ Zip Code	Phone No			
Owner to receive copy of billyesno						
*PER VILLAGE CODE, PROPERTY OWNERS ARE LIABLE FOR OUTSTANDING UTILITY BILLS SHOULD THE TENANT VACATE THE PREMISES.						