

**RIDGEVILLE UTILITIES  
SERVICE AGREEMENT**

Office Use Only

Town of Ridgeville  
Ridgeville Utilities  
106 S Walnut St  
PO Box 43  
Ridgeville, IN 47380  
765-857-2377  
ridgevilleclerk@gmail.com

Service Address: \_\_\_\_\_ Book# \_\_\_\_\_

Application Date: \_\_\_\_\_ Meter Start: \_\_\_\_\_

End Service Date: \_\_\_\_\_ Meter End: \_\_\_\_\_

Old Acct#: \_\_\_\_\_ New Acct# \_\_\_\_\_

Deposit Due: \_\_\_\_\_ (Own) \_\_\_\_\_ (Rent)

Receipt#: \_\_\_\_\_ Cash: \_\_\_\_\_ Check# \_\_\_\_\_ MO: \_\_\_\_\_

Water Start Date: \_\_\_\_\_ **Copy of Driver's License** \_\_\_\_\_

I hereby make an application to Ridgeville Utilities and request that the property located at the address above be connected to the Utility System under the account (Owner/Renter: \$200.00 PER METER and Tap Connection Charge:

ACTUAL COST

**PLEASE PRINT**

Date: \_\_\_\_\_

Primary Name: \_\_\_\_\_  
First Middle Last

Driver's License# \_\_\_\_\_ State: \_\_\_\_\_

Phone# \_\_\_\_\_ Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Secondary Name: \_\_\_\_\_  
First Middle Last

Driver's License# \_\_\_\_\_ State: \_\_\_\_\_

Phone# \_\_\_\_\_ Email Address: \_\_\_\_\_

Under the penalties of perjury, I declare that the information provided is true, correct and complete to the best of my knowledge. I further acknowledge that providing false or misleading information on this application will subject me to criminal and/or civil prosecution.

If you are approved, service will begin within 48 hours, excluding weekends or holidays. **The resident must be present** when the water is turned on to prevent any possibility of running water, broken pipes or leaking toilets.

Primary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Secondary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In consideration there of, I agree:

\_\_\_\_\_ 1. To pay all applicable deposits, service charges, rates, meter connection charges or tapping fees and any other charges imposed by Ridgeville Utilities and to comply at all times with the ordinances, rules and regulations thereof relating to water, wastewater and sanitation services, making them part of this agreement.

\_\_\_\_\_ 2. To pay a Security Deposit by the rules and regulations of the Town of Ridgeville Utilities. As a renter, I may be requested to provide a copy of my lease agreement. Home Owners: \$200 / Renters: \$200

\_\_\_\_\_ 3. My water bills are sent out every month about 15 days before the due date. To avoid water penalty being added to the net amount of my bill, it must be paid on time. The due date is the 15th of each month.

\_\_\_\_\_ 4. The Town of Ridgeville Utilities shall in no way be responsible for maintaining any service line owned by me, or for damage done by water escaping therefrom, or for defects in my service lines connected to the Town of Ridgeville Utilities. The Town of Ridgeville shall not be held responsible for (a) the breaking of any service lines or apparatus beyond the meter, (b) any failure in the supply of water, or (c) the stoppage of the flow of water for any reason. Homeowners may not operate the meter's water valve for any reason. Damages to a meter will be repaired at the homeowner's expense.

\_\_\_\_\_ 5. Without additional notice, service will be disconnected for non-payment or in cases of inadequate payment (the amount paid is less than the required amount) 2 days after the due date printed on your statement. Without additional notice, the service will be disconnected for my failure to comply with all or any part of this agreement. I also understand that for my service to be resumed, **FULL payment** of my bill must be made along with a \$35.00 reconnection fee during the normal office hours of 8:00am-4:00pm (closed from 12:00pm-1:00pm), Monday, Tuesday, Thursday and Friday.

\_\_\_\_\_ 6. To obtain a final bill, I must sign a Final Notice Form in person at the Clerk's Office located at 106 S Walnut St, Ridgeville. Failure to file and sign the Final Notice Form will result in further charges until one is completed.

I have read and understand my responsibilities in this agreement.

Primary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Secondary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Clerk's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only	
Landlord/Owner Name: _____	Phone# _____
Address: _____	
Duplicate Bill Requested? _____ Yes _____ No	Duplicate delinquent letter requested? _____ Yes _____ No
<b><u>Final Notice Form</u></b>	
Primary Name: _____	End Service Date: _____
Forwarding Address: _____	
Primary Signature: _____	Date: _____
Clerk's Signature: _____	Date: _____