

**LIGONIER UTILITIES**  
**OWNER'S APPLICATION FOR WATER SERVICES**

Occupants Name(s): \_\_\_\_\_

Service Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Move In date: \_\_\_\_\_

Email Address \_\_\_\_\_

Indiana Driver's License # \_\_\_\_\_ (Attach Copy)

Social Security Number(s) \_\_\_\_\_

Have you ever had an account with the City of Ligonier? \_\_\_\_\_

If you have, List Last Address: \_\_\_\_\_

The City of Ligonier will bill you each month for Water, Wastewater and Sanitation. The sanitation billing is a current billing and the water/wastewater is for the previous month. All will be on the same billing. It is your responsibility to let the City know when you move out. You will be billed a final billing after your move out date. By signing this application you are saying you have read this document and agree to pay any and all bills incurred between your move in date and the time you notify us to discontinue service.

\_\_\_\_\_  
Occupant 1 Signature

\_\_\_\_\_  
Occupant 2 Signature

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

**For office use only**

Account Number \_\_\_\_\_ Bk & Rt. \_\_\_\_\_ Sequence \_\_\_\_\_