

Office use only: Service account # \_\_\_\_\_ Effective date \_\_\_\_\_

**CITY OF MONROE UTILITY SERVICE APPLICATION**  
**233 S. Main St., Monroe, OH 45050**  
**Phone# (513) 539-7374 / Fax# (513) 360-2225**

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

Last Name \_\_\_\_\_ First Name(s) \_\_\_\_\_

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

Mailing Address (if different from above) \_\_\_\_\_

Please Check One: Owner \_\_\_\_\_ Land-Contract \_\_\_\_\_ Renter \_\_\_\_\_

Name and Address of Property Owner (if Renting/Land Contract) \_\_\_\_\_

\_\_\_\_\_ Owner's Phone \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Applicant's Employer \_\_\_\_\_ Employer's Phone \_\_\_\_\_

Employer's Address \_\_\_\_\_

Residence phone number \_\_\_\_\_ Applicant's SSN \_\_\_\_\_

Co-Applicant's Name \_\_\_\_\_ Co-Applicant's SSN \_\_\_\_\_

Co-Applicant's Employer \_\_\_\_\_ Address \_\_\_\_\_

Applicant's Date of Birth \_\_\_\_\_ Co-Applicant's DOB \_\_\_\_\_

Have you or anyone else in your household had previous service in their name in the City of Monroe? \_\_\_\_\_ If so, where \_\_\_\_\_

The undersigned agrees to pay each month, upon proper billing, the charges for water and/or sewer, storm water and refuse service used at the rates established for the system on which the property is located. The Applicant, by signing this application, agrees to be bound by all the provisions and the Rules and Regulations adopted by the City of Monroe, Ohio, as they exist and as amended from time to time. Upon vacating the premises, the Applicant further agrees to give proper notice to the Utility Department, and all charges against said property, upon proper billing, shall be paid in full.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_