

Borough of Cheswick

220 S. Atlantic Avenue, P.O. Box 235, Cheswick, Pa 15024
724-274-5125

REQUEST FOR WATER/SEWAGE/REFUSE SERVICES

Water Department of the Borough of Cheswick

The undersigned herewith makes application for water and sewage service to be supplied by meter measure from the Borough mains on _____ Street/Road in the Borough of Cheswick.

The undersigned agrees to pay for such water and sewage service in accordance with the rates now or hereafter to be established by the Water Department of the Borough of Cheswick, and further agrees to abide at all times by the rules and regulations of the Water Department of the Borough of Cheswick which are now effective and which may hereafter be adopted. (Copy of said rates, rules, and regulations are on file at the Office of the Borough of Cheswick).

_____ Applicant – Print Name	_____ Applicant – Signature
_____ Applicant – Phone Number	_____ Applicant – Email
_____ Applicant – Billing Address	
_____ Date of Registration	_____ Date of Residence
_____ Other Members of Household (Relatives, Renters, etc.)	

Office Only:

MuniLink Account No.: _____ Date of Account Creation: _____

Rental Deposit \$125.00 Paid N/A