



SEWER UTILITY APPLICATION

Please complete and return the form to Village of Centerburg, Drawer D, Centerburg, Ohio 43011, or email it to utilitybilling@centerburgoh.org.

Applicant Name:

Home Phone: () _____

Cell Phone: () _____

Work Phone: () _____ Ext. _____

Email Address: _____

Co-Applicant Name:

Home Phone: () _____

Cell Phone: () _____

Work Phone: () _____ Ext. _____

Email Address: _____

Service Address: _____

Mailing Address: _____

Date service is to begin: _____

Sewer billing is every month and **payments should be made to one of the following:**

1. ACH – auto withdraw
2. Personal or bank checks must be mailed to Centerburg Sewer Department, P.O. Box 2014 Mount Vernon, OH 43050-7214
3. Credit card/debit card or E-Check through Official Payments www.centerburgoh.org

A 10% penalty will be charged if not paid by the due date. Per Codified Ordinance 925, delinquent amounts older than 60 days are subject to a lien being placed on the property. Failure to not receive your bill does not abate the timely payment of the bill, including fees and penalties. You may obtain a copy of the Rules & Regulations through our website or by requesting a copy be mailed to you. By signing this agreement, you are also agreeing to the Exhibit and the information provided in the welcome letter.

Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____

