



**Portage County Water Resources Billing Office**

449 S Meridian Street, 7th Floor, P.O. Box 812

Ravenna, OH 44266-0812

Billing Office: 330.297.3672

Fax: 330.297.3680

**Application for Water Service Shut Off/Turn On**

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

Account No. \_\_\_\_\_

Customer Name (Print): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

\_\_\_\_\_

Service Address (if different from above): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Date Requested for Water Shut off (\$25 charge): \_\_\_\_\_

**There will be no one living at the service address during the duration that the water is turned off.**

Date Requested for Water Turn on (\$25 charge): \_\_\_\_\_

**Customer must be present at the turn on appointment.**

Applicant's Signature: \_\_\_\_\_

Payment is due at the time of application. Miscellaneous charges and fees are per Section 1400.07 of the Portage County Rules and Regulations, Resolution 12-0552.

Notes & Comments:

Payment Received by (DBFM employee): \_\_\_\_\_

Total Charge: \$ \_\_\_\_\_

Cash or Check # \_\_\_\_\_

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**TO BE COMPLETED BY WATER RESOURCES DEPARTMENT:**

Portage County Water Resources Employee: \_\_\_\_\_

Date of Service: \_\_\_\_\_

Meter Read: \_\_\_\_\_