

VILLAGE OF HEBRON
WATER DEPARTMENT
P.O. BOX 381
HEBRON, IL 60034
PHONE: 815-648-2335 FAX: 815-648-4385
WATER SERVICE REQUEST INFORMATION

NAME: _____

ADDRESS: _____

ADDRESS: _____ APT.: _____

CITY, STATE, ZIP: HEBRON, IL 60034

PHONE #: _____ [] CELL

EMAIL _____

OWN _____ RENT/ LEASE FROM: _____ TO _____

IF RENTAL UNIT COMPLETE THE FOLLOWING

LANDLORDS INFORMATION

NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE #: _____ [] CELL

EMAIL _____

FOR VILLAGE USE ONLY

ROUTE #: _____ ACCOUNT #: _____

METER READING: _____

RADIO READ [] YES [] NO

SERIAL NO. _____ RADIO ID NO. _____

**STARTING
BILLING CYCLE**

[] Full

[] 2 Months

[] 1 Month

[] In computer