

8 E. Main Street
PO Box 447
Fonda, NY
Phone: 518-853-4335
Fax: 518-853-4555



Seasonal Water Service Disconnection-Reconnection Application

Today's Date: _____ Account # _____ SBL# _____

Owner(s) Name: _____

Owner's Address: _____

Property Address: _____

Contact Phone: _____ Contact Email: _____

I hereby request to have my water service turned off/turned on at the above property:

Seasonal Shut Off Water is to be turned off this date: _____

Seasonal Turn On Water is to be turned on this date: _____

The Village will not impose a water rent fee with respect to water service to any property that has been disconnected for a **period of one (1) month or more if:**

- a) The water service connection to the property remains unused and:
- b) The water service has been turned off at the request of the customer

I understand and agree that as the property owner(s) I am responsible for the costs of water services as outlined above and must notify the Village of Fonda Water Department at least 7 days in advance when temporary water service disconnection/reconnection will be required. Whenever the owner or occupant requests the Village to shut off or turn on the supply of water, such owner or occupant shall pay a fee as established in the schedule of fees, as adopted by the Board of Trustees. The owner shall indemnify the Village of any claims by tenants or other persons due to the shutting off of such water services. **Sewer charges, if any, will continue according to the sewer ordinance, even if no water is used. Failure to pay these charges within the current fiscal year will require such unpaid amounts to be relieved to the village property tax bill.**

Date _____ Signature _____

For Office Use Only: Date Notice Received: _____

Seasonal Shut Off Water Meter Reading _____

This certifies that water service has been shut off as prescribed by the above notice on this date.

Date Street & Water Commissioner

If meter is removed: Meter Serial # _____

Seasonal Turn On Water Meter Reading: _____

This certifies the water service has been turned on as prescribed by the above notice on this date.

Date Street & Water Commissioner

Seasonal turn-off/turn on fee: Amount paid _____ Not paid ☐ bill on next regular bill date _____

Entered in Master File ☐ date: _____ by _____ Entered in Meter Book ☐ date: _____ by _____