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:	Co	ntact Email:	
I hereby request to h	ave my water service turned of	f/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:	
period of one (1) mor a) The water			een disconnected for a
must notify the Village disconnection/reconne supply of water, such o Trustees. The owner services. Sewer charge	of Fonda Water Department at least to will be required. Whenever owner or occupant shall pay a feet shall indemnify the Village of any oges, if any, will continue according.	am responsible for the costs of water service ast 7 days in advance when temporary wathe owner or occupant requests the Village as established in the schedule of fees, as claims by tenants or other persons due to the sewer ordinance, even if now uire such unpaid amounts to be relevied	ter service to shut off or turn on the adopted by the Board of he shutting off of such water vater is used. Failure to pay
Date	Signature		
		***************************************	*************
-	Date Notice Received:		
Seasonal Shut Off	Water Meter Reading		
This certifies that wa	ter service has been shut off a	s prescribed by the above notice on this	s date.
Date		Street & Water Commissioner	
If meter is removed: Met	er Serial #		
Seasonal Turn On	Water Meter Reading:		
This certifies the water	r service has been turned on as p	rescribed 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	bv