

# WATER TURN ON/TURN OFF REQUEST FORM

## CITY OF WHITE SULPHUR SPRINGS

105 W. Hampton St., P.O. Box 442, White Sulphur Springs, MT 59645  
Phone: (406) 547-3911 Fax: (406) 547-3945 Email: wss@itstriangle.com

Today's Date: \_\_\_\_\_

Fees:

\$50 On/Off--Regular Hours  
\$75 On/Off--Off Hours

**Customer Information:**

Customer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner: \_\_\_\_\_

Renter: \_\_\_\_\_

New Owner: \_\_\_\_\_

Previous Owner's Name: \_\_\_\_\_

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

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

Forwarding Address (If Applicable): \_\_\_\_\_

Do you need your water turned on or turned off?

Circle One: **Turn OFF** or **Turn ON**

When would you like your water turned on/off?

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

**NOTE:** When the water is turned off, you will still be charged \$37.30 a month.

This charge includes the following: Water Tank Debt \$21.87  
Sewer Base \$15.43

Reason for Turn On/Off: \_\_\_\_\_

Authorized Signature/Date: \_\_\_\_\_

**Customer Release/Waiver:**

The customer/property owner or a representative **MUST** be present when the water is turned on or off.

The customer/property owner/authorized agent understands that City employee(s) are not plumbers, and will not and are not asked to inspect the lines or fixtures associated with the water connection to the property and/or premises.

The shut-off valve is at the curb stop within the City's right of way and the customer/property owner/authorized agent is responsible for inspecting the inside of the premises, which are served by this connection, to determine that the water is turned off and no longer flowing into the premises.

I, \_\_\_\_\_ (printed name) acknowledge that on \_\_\_\_\_ (date)

City employee(s) performed the requested water turn on/off.

I hereby release the City of White Sulphur Springs, its agents and assigns, from any liability for the requested action.

Authorized Signature/Date: \_\_\_\_\_

(Customer/Property Owner/Authorized Representative)

**Public Works:**

Meter Reading on Turn On/Off Date: \_\_\_\_\_ Read by: \_\_\_\_\_

Turn On/Off Completed (City Employee Initials): \_\_\_\_\_ Date: \_\_\_\_\_

**City Clerk:**

Fee: \$50  
Date Fee Paid: \_\_\_\_\_  
Account Status: \_\_\_\_\_  
Rate: \_\_\_\_\_

Proration %: \_\_\_\_\_  
Gallons Used: Water: \_\_\_\_\_  
Sewer: \_\_\_\_\_