CITY HALL
310 Greenwood St. • Grand Ledge MI 48837
Ph: 517.627.2149 • Fax: 517.627.9796 • www.cityofgrandledge.com

UTILITY SERVICE APPLICATION

Name: _____

Email Address: _____

Do you wish to sign up for paperless e-billing *(circle one)*: YES NO

By choosing yes, I elect to receive my bill electronically. I will keep my email address updated with the City of Grand Ledge. I understand that failure to receive a bill does not exempt me from penalty, collection activity, or shut off subject to applicable notice requirements. ***I understand that I will no longer receive a postcard copy of my bill.***

Phone Number: _____ Alternate Phone: _____

Service Address: _____

Mailing Address: _____

Date occupancy begins: _____

Do you own the property *(circle one):* YES

NO This form must be signed by the property owner.

UNPAID BILLS ARE A LIEN ON THE PROPERTY.

FAILURE TO RECEIVE BILL DOES NOT WAIVE PENALTY.

I agree I am responsible for any damages to the property of the City of Grand Ledge caused by my negligence. I agree to promptly pay any water/sewer bills, along with any fees I may incur. I understand failure to make timely payment may result in the City of Grand Ledge using all means permitted by law to collect the debt.

_____ _____

Applicant Signature Date

IF RENTAL PROPERTY

Property Owner's Name: _____

Property Owner's Address: _____

_____

Property Owner's Phone Number: _____ Alternate Phone: _____

CHOOSE ONE

☐ I agree to allow the City of Grand Ledge to add the applicant's name on the water/sewer account for my property located at the above service address. I understand my name will remain on the water/sewer account and I remain ultimately responsible for any and all charges associated with the account.

☐ I agree to allow the City of Grand Ledge to remove my name from and place the applicant's name on the water/sewer account for my property located at the above service address. I understand the City of Grand Ledge will require the applicant to pay a $250.00 deposit, and I remain ultimately responsible for any and all charges associated with the account after the City applies the deposit to any unpaid charges.

_____ _____

Property Owner's Signature Date