

Nilwood Water & Sewer System

P O Box 33
33 Morean Street
Nilwood, Illinois
FAX # 217-627-2231

*** (COPY) ***
Photo ID Required ***

NEW CUSTOMERS

DATE: _____

CUSTOMERS NAME: _____

PRINT: _____

SIGNATURE: _____

SPOUSES NAME: _____

SERVICE ADDRESS: _____

BILLING ADDRESS (if different from Service address): _____

HOME PH# _____ CELL# _____ WORK PH# _____

PLACE OF EMPLOYMENT: _____

OWN _____ RENT _____ CONTRACT FOR DEED _____

OWNER/S OF REAL PROPERTY WITH NO IMPROVEMENTS _____

TYPE: Frame Home _____ Mobil Home _____ Apartment _____ Commercial _____

OTHER (explain) _____

BEGINNING SERVICE DATE: _____

NOTE: Completely fill out New Customer Form and the Cross-Connection Control Survey. Both forms must be filled out before service is provided.

RENTERS, CONTRACT FOR DEED PURCHASERS or OWNER/S OF REAL PROPERTY NOT IMPROVED WITH A RESIDENCE, will pay a \$100 deposit for Water Services and a \$100 deposit for Sewer services where provided.

Copy Drivers Lic. Or Photo ID on bottom of form or on another sheet.

102011

Please Return Completed Application and Deposit To:
Otter Lake Water Commission
6475 W Montgomery Road, PO Box 468
Virden, IL 62690
Phone: 217-965-1566 - Fax: 217-965-1530
Email: otterlake@otterlakewater.net www.otterlakewater.net

Account Number: _____ CROSS-CONNECTION CONTROL SURVEY

The following form is to be used by water department personnel and/or by customers of the NILWOOD public water supply. Data from this form may be used to determine if the property should be inspected by a licensed plumber with a CCCDI certification to detect and correct any cross-connections found on the property.

Date survey conducted: _____

Name/Title of person conducting survey: _____

Name of water user: _____ Address: _____

Phone number: _____

Residential: (Check all that apply)

Kitchen: Sink Faucet _____ Sink Faucet w/Sprayer _____ Ice Maker _____ Garbage Disposal _____

Other: _____ Other: _____ Other: _____

Comments: _____

Bath: Lavatory _____ Toilet _____ Bathtub _____ Hot Tub _____ Bidet _____

Other: _____ Other: _____ Other: _____

Comments: _____

Other: Boiler heat _____ How Many Boilers? _____

Exterior: Outside faucets _____ How Many? _____ Non-Freezing Type: _____ How Many? _____

Lawn Irrigation System (Portable) _____ , Lawn Irrigation System (Permanent) _____

Lawn Fertilizer System _____ Portable High-Pressure Washer _____ Private Wells(s) _____

Is/Are private well(s) physically connected to the water system? Yes _____ No _____

Other: _____

Other: _____

Other: _____

Comments: _____

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