

# Cañon City Water Final Request Form

Phone # 719-269-9015

E-mail: waterbilling@canoncity.org

Fax # 719-269-9006

Fill out all requested information circled

Seller Information	Date sent to City:	From:	
	Date to be read:	Closing date:	
	Service Location	ACCT #	
		LOCATION #	

Title Co name, phone & fax #		<b>All new owner info below is required</b>
	<b>NEW OWNER:</b>	
	<b>BILLING ADDRESS:</b>	
	(If different than service location)	
Title Co File #	<b>CITY, STATE, &amp; ZIP CODE:</b>	
	<b>PHONE #</b>	
	<b>PHONE #</b>	

**TITLE COMPANY INFORMATION Requested**

BALANCE ON ACCT:		BILLED THRU:	
WATER USAGE DUE:	0.00	CLOSING DATE:	
METER CHARGE DUE:	0.00	----->Daily Rate	#DIV/0!
STORM WATER DUE:	0.00	----->Daily Rate	#DIV/0!
ZONE CHARGE DUE:	0.00		
FINAL READ FEE DUE:	15.00	<b>GRAND TOTAL \$</b>	<b>\$15.00</b>

**A \$15.00 FEE IS CHARGED FOR ALL FINALS SENT 24 hrs prior to read or \$25.00 ASAP FEE for same day requests.**  
 \*\*\*If there is a balance on acct., a \$5.00 LATE FEE or 1.5%, (which ever is greater), will be added to the account if payment is not received by the last business day of the month. If water is off, buyer must COME INTO CITY HALL to set up appointment and pay \$25 for turn on.

**\*\* WATER DEPARTMENT USE ONLY \*\***

CURRENT READ		RES/ COM	IN / OUT	CYCLE
PREVIOUS READ		r	i	
TOTAL USAGE	0			
ZONE RATE PER 1,000			1 = single unit 2 = multi unit	1
			METER SIZE	75

**\*\* STORM WATER CHARGES CITY RESIDENTS ONLY \*\***

SQUARE FEET		Copy prior owner screen:
RATE x	0.001821 per square foot per month	Owner Changed: _____
TOTAL STORM WATER DUE	<b>\$0.00</b>	Location name chgd: _____
		Date Changed: _____
		Notes Entered: _____
		Read or date reposted: _____
		Charges posted: _____
		Auto pay Deleted: _____

Date Prepared:	Prepared By:	Authorized By:
		Approved By: .