

CITY OF VERNONIA UTILITY DEPARTMENT

1001 Bridge Street
Vernonia, OR 97064
503-429-5291 x101
Fax: 503-429-4232

Residential Water Service Shut-Off Request

I, _____, the Owner or Authorized Agent of the Owner
Name *(Please Print)*
request that the water service at the following vacant residence be terminated.

Property Address

Current Account Number

Owner's Telephone Number

Date Service Should Be Terminated

Important Information – Please Read

- I understand that there is a \$35.00 charge for the termination of service.
- I understand that it is the owner's responsibility to verify that water service has been terminated. The City of Vernonia is not responsible for damages or water charges if service termination is not accomplished.
- I understand that all water valves on the customer's side of the line should also be closed.
- I understand that any prior charges must be paid and that penalty and interest will accrue on any unpaid charges.
- I understand that there will be no minimum charge for water service availability after service is terminated.
- I understand that, after water service is terminated, service will not be restored unless the Owner requests in person the service restoration.

The undersigned Owner or Authorized Agent on behalf of the property owner hereby releases The City of Vernonia, including its offices, employees and agents from any and all liability related to the termination of water service, the failure to terminate water service or the restoration of water service at the address shown above.

Owner or Authorized Agent

Date