OAK PARK

14000 Oak Park Blvd., Oak Park, MI 48237 (248) 691-7470 www.oakparkmi.gov

Winter Protection Request Form

Address to be shut off: _____

While the residence is vacant, utility billing should be mailed to the following address:

Name:_____ Address:_____

City:_____ State:_____ Zip:_____

(1) I understand that the City of Oak Park Utility Billing will shut off my water for a fee of $100 which will be added to my utility bill. While the water service is shut off, I will not be assessed charges for water or sewer. All other charges are still applicable for billing. When the water service is reconnected, the above-mentioned charges will resume. It is also my responsibility to ensure that Utility Billing is informed of when to commence billing of my water account.

(2) It will be the responsibility of the resident to provide winter protection from freezing for the water meter and plumbing in the dwelling. If the water meter freezes during the winter months, the resident will have to pay for a meter replacement.

(3) The customer must be at the residence for shut off and reconnection. Shut offs / reconnections take place Mondays through Thursdays between 8 a.m. and 3 p.m. (except for holidays designated on the city calendar). If service reconnection is requested outside of the above-mentioned times, (a) a crew must be available to provide shut off or reconnection and (b) the customer must pay minimum overtime charges for two men for two hours, in addition to the $100 fee mentioned in paragraph 1.

If you are an organization doing work on behalf of another agency, please provide with this form official documentation, usually an affidavit, granting you authority to request this service.

I have read the above terms and conditions and hereby agree to them. I acknowledge that I am the owner or legally given the authority to have utilities turned on/off to this property.

Signature: _____ Date: _____

Telephone:_____ Witnessed by city staff _____

For Office Use Only

Current balance: $_____ Date of shut off:_____ Final read:_____

$100 charge done by:_____ Date:_____ Final bill by:_____ Date_____