

WATER SERVICE APPLICATION
VILLAGE OF LOAMI
602 NORTH MAIN STREET
PO BOX 226
LOAMI, IL 62661
217.624.3111
www.loami.org

DATE: _____

NAME #1: _____

NAME #2: _____

PHYSICAL ADDRESS: _____ LOT NO: _____
(IF APPLICABLE)

PO BOX: _____

MAILING ADDRESS IF DIFFERENT THAN ABOVE: _____

CELL PHONE #: _____ HOME #: _____

DRIVERS LICENSE NUMBER: _____

A \$100.00 deposit is required for water service with the Village of Loami.

Water payments are due by the **15th of each month by 6 PM**, after due date a 10% charge will be added to your account. Any balance over 30 days is considered *delinquent*. In the event of disconnection, you will be charged a \$50.00 reconnection fee.

For office use only

Beginning reading : _____

New Account Number: _____

To System: _____ To Meter Book: _____

Deposit entered: _____

ERT ID: _____