

VILLAGE OF RIVERDALE
WATER DEPARTMENT
157 WEST 144TH ST.
RIVERDALE, IL 60827

WATER RECONNECTION AFFIDAVIT

Address of property: _____
Water account #: _____ Date: _____

I hereby authorize the Village of Riverdale Water Department to reconnect water service to the above mentioned property whether or not property is occupied. I release the Village of Riverdale of any liability due to any water damage as a result of any water leaks on the premises. To help prevent any water damage, please make sure all water faucets are in the off position. Water will be reconnected after appointment is made with the Public Works department or if water was terminated for non-payment (less than one week) it will be reconnected within 24 hours of payment.

Furthermore, the Village of Riverdale will not be responsible for any damage that might occur to any of the property including the pipes if the property has been winterized. The pipes will no longer be winterized if water is turned on to said property. This can cause pipes to explode and cause water damage especially if no heat is provided to property. Village will not turn water on to any property where no heat is provided.

Customer Signature: _____ Contact #: _____
Clerk Signature: _____

FOR OFFICE USE ONLY:

Appointment is needed to reconnect water service to property: Y or N
Water service was terminated on: _____
Date appointment was scheduled: _____

Water was terminated for non-payment: Y or N
Date water was terminated: _____
(Must be less than one week in order for them to have water reconnected within 24 hours and without appointment)

AMOUNT PAID: _____
PAID BY (CIRCLE ONE) CASH, MONEY ORDER# _____ CREDIT OR DEBIT _____
FAXED TO PW FOR 24 HOUR RECONNECTION: Y or N TIME SENT: _____