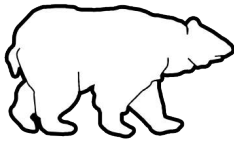


THE CORPORATION OF THE TOWN OF COCHRANE

ONTARIO, CA



**COCHRANE**

**WONDERFULLY UNEXPECTED**

WATER AND WASTEWATER SERVICES

WATER ON/OFF REQUEST

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Civic Address: \_\_\_\_\_

Name: \_\_\_\_\_

is request that the Water Service to be Shut off  or Turned on  at the above address on (date) \_\_\_\_\_.

I am the owner of the above mentioned address.

In addition, as per Resolution #362-2011, the rates are as follows:

May 1<sup>st</sup> to October 31<sup>st</sup> - \$ 62.20 (each)

November 1<sup>st</sup> to April 30<sup>th</sup> - \$124.63 (each)

Signature: \_\_\_\_\_

To be completed by office staff

Work Order #: \_\_\_\_\_

Employee receiving: \_\_\_\_\_

Request: \_\_\_\_\_ Account#: \_\_\_\_\_

To be completed by outside operator

Date Work Completed: \_\_\_\_\_ Completed by: \_\_\_\_\_

If unable to shut off – reason why: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_