

Utility Deposit Form
Village of Jefferson, Ohio
440-576-3941

Payment Amount \$	
Check#	Cash

(Please print and answer all questions)

Business Name (if applicable) _____		Tax ID Number _____	
Name _____		Social Security Number _____	
Spouse's Name _____		Social Security Number _____	
New Street Address _____		Apt: _____ Jefferson, OH 44047	
Mailing address if different _____			
City _____		State _____	Zip Code _____
Settlement / Move In Date _____		Phone Number _____	
Rental House Yes ____ No ____ If Yes, Landlords Name _____			
Landlords Address _____			

All occupants of single family, two unit and three unit multifamily dwellings are required to use the exclusive refuse and garbage hauler designated by the village and pay their monthly bills for that service.

Trash Service Options (please choose one from attached list) Cart ____ Senior Cart ____ Bags ____

As an authorized signor on the Depository Account presented, by completing and signing this form you give Village of Jefferson permission to charge/debit your account, on or after the indicated date. This authorization is to remain in full force and effect until Village of Jefferson has received written notification from me of its termination. **

Depository Bank _____	Checking <input type="checkbox"/>	Savings <input type="checkbox"/>
Routing Number _____	(include voided check)	
Account Number _____	Personal <input type="checkbox"/>	Business <input type="checkbox"/>

Sewer Deposit of \$40.00 and Refuse Deposit of \$60.00 Refundable upon departure from the premises.
The undersigned customer hereby agrees to take and pay for all sewer and / or trash services on said premises.

Applicant signature: _____ Date _____