APPLICATION FOR MONTPELIER MUNICIPAL UTILITY SERVICE

☐ **Owner/Occupant** ☐ **Residential Landlord** ☐ **Residential Tenant** ☐ **Land Contract**

For Departmental Use Only
Account Number:_____
Date:_____
Work Order #:_____
Deposit #: _____
Lease/Deed: _____
Driver's License: _____
Check Index: _____Due Dates info.: _____
Deposit Agreement: _____
Income Tax Form: _____

PROPERTY INFORMATION

_____
Address of location at which service is requested

_____
Names and ages of all residents at the service location

_____
Date occupancy began or is anticipated to begin

APPLICANT INFORMATION

_____ _____
Name of Applicant Most Recent Prior Address

_____ _____
Applicant's Billing Address Applicant's Email Address

_____ _____
Applicant's Phone Number Preferred Contact Method

_____ _____
Applicant's Date of Birth Applicant's Driver's License Number

_____ _____
Applicant's Social Security Number Applicant's Employer

CO-APPLICANT INFORMATION

_____ Name of Co-Applicant

_____ Most Recent Prior Address

_____ Co-Applicant's Billing Address

_____ Co-Applicant's Email Address

_____ Co-Applicant's Phone Number

_____ Preferred Contact Method

_____ Co-Applicant's Date of Birth

_____ Co-Applicant's Driver's License Number

_____ Co-Applicant's Social Security Number

_____ Co-Applicant's Employer

In case of emergency, who shall we contact:

Name & Number:_____

Alternate Name & Number:_____

LANDLORD INFORMATION (if applicable)

_____ Name of Landlord

_____ Address of Landlord

_____ Phone Number of Landlord

As the legal land owner, any change of occupancy/ownership shall be your responsibility for notification to the Utility Department and there will not be any lapse in time of your responsibility.

SECURITY DEPOSIT INFORMATION

The Standard Security Deposit is due at the time of Application for Utility Service. As set forth in the Utility Procedures Section 4.00-4.04, the Utility Department reserves the right to collect a deposit at any time.

IMPORTANT NOTICES (all responsible parties please read and initial, including, if applicable, landlord)

1. If you anticipate ever renting the property to a third party, or otherwise anticipate any changes in occupancy, you have a continuing obligation to advise the Utility Department of any changes in the occupancy of the premises, and the identity and mailing address of new tenants and/or occupants. _____ _____ _____

2. Falsification of information on this application may be cause for termination of utility service. _____ _____ _____

3. By signing this application you are authorizing the Utility Department to contact your prior utility service for credit information. _____ _____ _____

4. Utility services can be discontinued if you fail to pay your account balance by the designated date. _____ _____ _____

5. Past due balances which are not covered by a security deposit or go uncollected will be posted as a lien against the property, taken to small claims, or sent to a collection agency. _____ _____ _____

6. The Montpelier Municipal Utility takes its customers identity information very seriously and has adopted and implemented Red Flag Rules in an effort to protect its customers. These Rules do not prohibit the Montpelier Municipal Utilities from aiding Landlords in maintaining their properties, locating previous tenants who may owe a delinquent utility bill, aiding tenants in contacting their landlord, nor does it prohibit the Montpelier Municipal Utilities from giving out credit history for its customers. _____ _____ _____

By signing and initialing this application, you hereby agree to abide by the Utility Regulations of the Montpelier Municipal Utilities.

_____ _____

Signature of Applicant/Date Signature of Landlord (if applicable)

_____ _____

Signature of Co-Applicant/Date Signature of Department Representative

Application Accepted: ____yes ____no Date:_____

A complete set of the utility rules and regulations can be found at www.montpelieroh.net

VILLAGE OF MONTPELIER
UTILITY DEPARTMENT

DOOR HANGER FEE	**$10.00**
NON-PAYMENT TERMINATION/RECONNECT FEES	**$75.00**
METER TAMPERING FEE	**$250.00**
RETURNED PAYMENT	**$40.00**

BELOW IS A LIST OF TERMINATION DATES FOR THE REMAINDER OF 2026 AND 2027. PLEASE TAKE NOTE OF THESE DATES. **PLEASE NOTE THAT THESE DATES CAN CHANGE DUE TO HOLIDAYS AND OTHER CONFLICTS.** CHARGES FOR DOOR HANGERS AND TERMINATION FEES SHALL BE ASSESSED WHEN THE DISCONNECTION BATCH HAS BEEN PROCESSED AND POSTED.

DUE TO THE EXTENSION POLICY ADOPTED BY COUNCIL ON JAN 25, 2016, THERE WILL BE LIMITED EXTENSIONS OF PAYMENTS GRANTED. NO PAYMENT PLANS SHALL BE EXTENDED TO PERSONS WHO HAVE PREVIOUSLY DEFAULTED ON A PAYMENT PLAN. IN ORDER TO SAVE YOU MONEY, IT IS OUR GOAL TO GET YOUR BILL CURRENT. PLEASE SEE ONE OF OUR CUSTOMER SERVICE REPRESENTATIVES AT THE UTILITY OFFICE IF YOU NEED HELP.

FOR YOUR CONVENIENCE, THE FOLLOWING IS A LIST OF APPROPRIATE DATES:

MONTH	DUE DATE	DELINQUENT NOTICES MAILED	DOOR HANGER	TERMINATION
October 2026	Thursday, Oct 15	Friday, Oct 16	Tuesday, Oct 27	Thursday, Oct 29
November 2026	Monday, Nov 16	Tuesday, Nov 17	Tuesday, Nov 24	Monday, Nov 30
December 2026	Tuesday, Dec 15	Wednesday, Dec 16	Wednesday, Dec 23	Tuesday, Dec 29
January 2027	Friday, Jan 15	Tuesday, Jan 19	Tuesday, Jan 26	Thursday, Jan 28
February 2027	Tuesday, Feb 16	Wednesday, Feb 17	Thursday, Feb 25	Tuesday, Mar 2
March 2027	Monday, Mar 15	Tuesday, Mar 16	Thursday, Mar 25	Tuesday, Mar 30
April 2027	Thursday, Apr 15	Friday, Apr 16	Tuesday, Apr 27	Thursday, Apr 29
May 2027	Monday, May 17	Tuesday, May 18	Tuesday, May 25	Thursday, May 27
June 2027	Tuesday, Jun 15	Wednesday, Jun 16	Thursday, Jun 24	Tuesday, Jun 29
July 2027	Thursday, Jul 15	Friday, Jul 16	Tuesday, July 27	Thursday, July 29
August 2027	Monday, Aug 16	Tuesday, Aug 17	Tuesday, Aug 24	Thursday, Aug 26
September 2027	Wednesday, Sep 15	Thursday, Sep 16	Thursday, Sept 23	Tuesday, Sept 28
October 2027	Friday, Oct 15	Monday, Oct 18	Tuesday, Oct 26	Thursday, Oct 28
November 2027	Monday, Nov 15	Tuesday, Nov 16	Tuesday, Nov 23	Monday, Nov 29
December 2027	Wednesday, Dec 15	Thursday, Dec 16	Monday, Dec 27	Wednesday, Dec 29

I have read and understand the above charges and schedule of due dates, notifications and termination dates.

I understand that if I have not paid my utility bill by the time the disconnection batch for the door hangers is processed and posted, the charge for the door hanger will be assessed to my bill even if I pay my bill prior to receiving the door hanger at my residence.

I understand that if for some reason I become delinquent and my water and/or electric service is terminated, I will be charged a $75.00 fee per meter. This charge will also remain on my account if my bill is not paid prior to the disconnection batch being processed and posted.

_____ _____

Applicant date Co-Applicant date

Approved October 12, 2026

Utility Regulations Termination Dates

INDIVIDUAL REGISTRATION
CCA – MUNICIPAL INCOME TAX

205 W Saint Clair Ave
Cleveland OH 44113-1503

Phone: 216-664-2070, 1-800-223-6317
www.ccatax.ci.cleveland.oh.us

Move in Date: _____ Phone No _____

Primary Social Security No. ___ - ___ - ____ Spouse Social Security No. _____

Primary Name _____ Spouse Name _____

Street Address _____ Apt. No _____

City _____ State _____ Zip Code _____

Prior Address _____ City _____ State _____ Zip Code _____

Lived at prior address: From _____ To _____

Mailing Address _____ City _____ State _____ Zip Code _____

LIST ALL OTHER RESIDENTS IN HOUSEHOLD (AGE 18 OR OVER)

NAME	AGE	SOCIAL SECURITY NO	CITY WHERE EMPLOYED
		- -	
		- -	
		- -	
		- -	

EMPLOYMENT (GIVE NAME AND ADDRESS OF EMPLOYER(S)

INDICATE WHETHER FOR YOURSELF OR SPOUSE FOR THE LAST TWO (2) YEARS. SHOW LAST JOB FIRST

COMPANY NAME ADDRESS/CITY

1. _____ **SELF** _____ **SPOUSE** _____

2. _____ **SELF** _____ **SPOUSE** _____

3. _____ **SELF** _____ **SPOUSE** _____

4. _____ **SELF** _____ **SPOUSE** _____

CHECK OTHER SOURCES OF INCOME:

RENT ☐ **SOC.SEC.** ☐ **PENSION** ☐ **SELF-EMPLOYED** ☐ **OTHER** ☐ _____

TRADE NAME AND ADDRESS IF SELF-EMPLOYED _____

If registration is for employers or business, you must also complete the Business Registration form.

SIGNATURE _____ **DATE** _____

The above signed declares that this statement is true and correct.