157 N. Paw Paw Lawrence, MI 49064 269-674-8161 PH 269-674-3004 FX www.lawrencemi.org



Department of Public Works
Brian Johnson, Supervisor

WATER/SEWER ACCOUNT SETUP APPLICATION

Application Date:	Closing Date/Lease Start Date:	
Applicant's Name: Last name, First name, N	Middle Initial or Business Name (if Management Company)	
Service Address: Street Address	City State Zip Code	
Mailing Address: (if different) P O Box/Street Address	City State Zip Code	
Check One: ☐OWNER ☐ TENAN	IT ☐ MANAGEMENT COMPANY ☐ REALTOR	
Primary Phone:	Secondary Phone:	
☐ Home ☐ Mobile ☐ Wor	rk Home Mobile Work	
Email Address:		
Last 4 Digits of Social Security/ Federal Tax ID:	Driver's License #	State:
Previous Address (if serviced by Village of Lawrence):_		
 Water and Sewer connection can on Water and Sewer accounts are billed I also recognize that my account doe Failure to receive a bill does not exce 	d on monthly basis. es not terminate when my water is shut-off for non-payment.	
Printed Name	 Signature	