

AFFIDAVIT OF UNOCCUPIED RESIDENCE

House Address: _____

Date of Unoccupancy: _____

Date of Return: _____

I, _____, certify that the above identified residence will be unoccupied and will produce no garbage for the month(s) of _____

I understand that if the residence is occupied during the month(s) listed above, the owner will be back-billed for an amount equal to the occupied rate for that month.

*****ONE DAY CONSTITUTES OCCUPANCY FOR A MONTH*****

I understand that if the residence will be UNOCCUPIED for a longer period of time then stated above, I must notify the City Finance Director in advance as no adjustment will be made upon my return if the garbage contractor has already been paid for that month. I will notify the City Finance Director when the residence is occupied.

Temporary address: _____

Date: _____

Signature: _____

MANDATORY 24 HOUR NOTICE REQUIRED **WATER SERVICE DISCONNECT-RECONNECT REQUEST**

I request the Public Utilities Department of the City of Babbitt to discontinue my water service at

(address)

(date)

I understand that the total charge for the disconnect and reconnect of water service is \$50 payable when I sign this request form. **I agree to give a 24 hour notice** when I request my water service be reconnected, and also that it is my responsibility to have someone in the building at the time of this service reconnection (preferably the same person who drained pipes, etc.).

I understand that if there are any property damages or problems arising from the shut-off or reconnect service, it is my responsibility to pay for and make the necessary repairs.

I have been advised that I will be billed a **sewer maintenance charge of \$21 per month** while the water service is disconnected.

In the event of an emergency, the local contact person for my property is

(name)

(phone)

Date signed _____

Signature of owner or agent

\$50 fee paid _____
date)

Cathy Klegstad, PUC Secretary/Accounting Officer