



# FINAL READ REQUEST

**This Application Must Be Received Four Days Prior To Closing.**

## 1) Property Information

**Purpose of Request:**

- Sale Property       Rental (New Tenant )

**Closing Date:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

**Property Type:**

**Property ID #:** \_\_\_\_\_

- Single Family Home    New Construction    Multi-Family (Association Billed)    Vacant    Foreclosure  
 Apt Bldg (\_\_\_\_Units)    School Church    Commercial/ Industrial (\_\_\_\_Units)    Other: \_\_\_\_\_

## 2) Seller Information

**Current Owner Name:** \_\_\_\_\_

**Forwarding Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

## 3) Buyer Information

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

**Owner Email Address:** \_\_\_\_\_

**Address to Forward Future Invoices**

**C / O Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City / State / Zip:** \_\_\_\_\_

**C/O Email Address:** \_\_\_\_\_

## 4) Requestor (Attorney / Real Estate Agent):

**Name & Company:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address** \_\_\_\_\_

## 5) Acknowledgement

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature - (circle One) Seller / Attorney / Agent

\_\_\_\_\_  
Date

**ACKNOWLEDGEMENT:** Applicant, as named below, requests that the Countryside IL update its billing records to reflect the pending transfer of the premises that is the subject of this Application. Applicant acknowledges that the amount due is based on the balance due on the water (sewer if applicable) account for the premises. Applicant certifies that the statements set forth in this document are true and correct.

OFFICE USE ONLY				Service: Water / Sewer / Both	Sewer: SLTSD / LG HLND / SEPTIC
<b>Date of Final Read</b>	_____				
<b>Previous Reading</b>	_____	<b>Service Date</b>	_____	<b>Usage</b>	_____
<b>Current Reading</b>	_____		_____		_____
<b>Direct Deposit</b> Y / N	<b>Deposit</b> Y / N	<b>Deposit Amount</b>	\$ _____	<b>Amount Due</b>	\$ _____
				<b>Less Deposit</b>	\$ _____
<b>Refund Y/N</b>	<b>Refund Amount</b>	\$ _____			