



# MUNICIPAL AUTHORITY

OF THE BOROUGH OF MANSFIELD

## WATER SYSTEM

### APPLICATION FOR WATER & SEWER SERVICE RENTAL PROPERTY

Today's Date: \_\_\_\_\_

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

Street Address for which service is requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Billing Address (if different from above): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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

Email(only used to contact you about the account): \_\_\_\_\_

**Circle one:**

I would prefer to receive my bill via **mail** or **email**.

Effective Date Service is Requested: (the day your lease begins): \_\_\_\_\_

Type of Service Requested:

\_\_\_\_\_ **Transfer of Existing Service to New Tenant \***  
Name of Landlord (or previous tenant): \_\_\_\_\_

\_\_\_\_\_ **Other (name change)** \_\_\_\_\_

\*A FINAL READING MUST BE TAKEN BEFORE SERVICE CAN BE TRANSFERRED. A final reading releases the new tenant from water and sewer usage charges made by the previous tenant. When you request to have the account taken out of your name there will be a \$9.00 Final Reading Fee on your last bill.

The Mansfield Municipal Authority reserves the right to contact an attorney/collection agency on any account falling delinquent. Any additional expenses/fees will be the responsibility of the account holder.

The undersigned hereby makes application for a supply of water and sewer service for the address listed above, beginning on the date listed above, assumes responsibility for payment and agrees to comply with the Rules, Rates and Regulations of the Municipal Authority. PLEASE NOTE: All applications are subject to approval.

TENANT SIGNATURE: \_\_\_\_\_

.....  
FOR OFFICE USE ONLY:

ACCOUNT# \_\_\_\_\_ RTE/SEQ# \_\_\_\_\_ METER ID# \_\_\_\_\_  
14 SOUTH MAIN STREET, MANSFIELD, PA 16933

PHONE: 570.662.2589 FAX: 570-662.3414 E-MAIL: [mmauth@ptd.net](mailto:mmauth@ptd.net)  
THE MUNICIPAL AUTHORITY IS AN EQUAL OPPORTUNITY PROVIDER