

**CITY OF WARWICK
UTILITY BILLING**

Closing Request form for Water and Sewer

This form supercedes any other previous forms. (Effective 7/2015)

Property Location: _____ Plat/Lot/Unit _____
Seller's Name _____
Buyer's Name _____
Buyer's Billing Address _____
Date of Request: _____ Attorney/Realtor _____
Date of Closing: _____ Phone Number: _____
Domestic Meter Reading: _____ Fax Number: _____
Deduct Meter Reading : _____

Previous Meter Reading: _____ Account No. _____

Total Cubic Feet: _____

Water Usage

Sewer Usage

Usage Charge: _____

Service Charge: _____

Amount Unbilled: _____

Past Due Balance: _____

Total Water Due: _____ [_____] Sewer Credit

Sewer Usage Due: _____

Sewer Assessment Account No. _____

Due at Closing from seller.

Annual Payment

Please pro-rate on the annual payment for calendar year and move a credit to seller / buyer.

The balance on the sewer assessment is transferable to the buyer.

INSTRUCTIONS

THIS REQUEST MUST BE SUBMITTED FIVE (5) DAYS PRIOR TO CLOSING.

Fill out top portion only. **Fax to (401) 732-0616.** For questions, please call the Water Division at 738-2000 Ext. 6607, or the Sewer Authority at 401-468-4710 .

Separate checks for usage and assessment. Please include account number on check, payable to Warwick Tax Collector. Mail payments to: PO Box 2000, Warwick, RI 02887