

WEST EARL TOWNSHIP

157 W. Metzler Road, PO Box 787 Brownstown, PA 17508
Phone 717-859-3201 Fax 717-859-3499

Request for final utility billing figures

Property Address _____ Parcel # 210- _____

Reason for request: _____ Transfer of Ownership _____ Foreclosure _____ Refinance _____ Settlement Date _____

Name of Firm Requesting Information: _____

Mailing Address: _____

Contact Person: _____ Email: _____

Phone: _____ Fax: _____

Current Property Owner(s): _____

New Owner(s): AS APPEARS ON DEED _____

Current Mailing Address: _____

Phone: _____ City/State/Zip: _____

Signature of Requestor: _____ Date _____

Receive information via _____ FAX _____ EMAIL

Please mail, fax or email all requests **NO FEWER THAN** five days prior to settlement date. Email: mwallace@westearltwp.org

Municipal Office Use Only

(all services are billed monthly; water & sewer are billed for previous month's use and trash is bill for current month)

Account Number _____ Total Balance Due _____

Water Past Due _____ Water Current Due _____ Calculated Water _____

Sewer Past Due _____ Sewer Current Due _____ Calculated Sewer _____

Trash/Recycling Past Due _____ Trash/Recycling Current Due _____ Calculated Trash _____

Street Light/Special Hydrant Assessment

Year _____ Amount Due _____ Date Paid _____ Amount Paid _____

Year _____ Amount Due _____ Date Paid _____ Amount Paid _____

• Active Liens or Open Civil Suits Lien/Suit # _____ Amount _____

Compost Card # _____ Meter ID # _____

The above information is valid through _____. All liens, civil suits, filings and satisfaction of fees are due upon settlement of the delinquent account.

Date: _____ Initials: _____