Tate Monroe Water Assn., Inc.

2599 SR 232 NEW RICHMOND, OHIO 45157
PHONE: 513-734-2236
FAX: 513-734-7950

VAULT REMOVAL DOCUMENT

THIS DOCUMENT IS TO CERTIFY THAT THE LANDOWNER LISTED BELOW DESIRES TO HAVE THE ENTIRE SERVICE TERMINATED AT THE INDICATED ADDRESS OF _____.
THIS SERVICE CAN NOT BE RE-ESTABLISHED UNLESS THE APPROPRIATE PAPER WORK IS COMPLETED AND CONNECTION FEE PAID.

NAME OF LAND OWNER_____

ADDRESS: _____, _____, OHIO _____
STREET CITY ZIP CODE

I HEREBY CERTIFY THAT I AM REQUESTING THAT THE ENTIRE WATER SERVICE BE REMOVED FROM THE INDICATED ADDRESS.

_____	_____
LANDOWNER'S SIGNATURE	**LANDOWNER'S SIGNATURE**
PRINT NAME_____	**PRINT NAME_____**
DATE_____	**DATE_____**

IN WITNESS WHEREOF the said Landowners have executed this instrument this _____ day of _____, 20_____. Signed and Acknowledged in the presence of:

STATE OF OHIO, COUNTY OF _____-SS:
On this _____ day of _____ 20_____ , before me, the subscriber, a Notary Public in and for said County, personally came _____ the Landowners in the foregoing instrument, and acknowledged the signing thereof to be _____ voluntary act and deed for the uses and purposes therein mentioned.

In Testimony Whereof I have hereunto subscribed my name and affixed my Notarial seal on the day and yea last aforesaid.

_____ Notary Public. My commission expires _____.