



Village of Decatur
114 N Phelps ST
Decatur, MI 49045
Phone: (269) 423-6114
Fax: (269) 423-9047
decaturmi.org

REQUEST FOR SEASONAL AVERAGE OF WATER BILL

Resident Name: _____

Resident Address: _____

Dates of Request: _____ to _____

Please check on of the following reasons for request:

____ Watering of Lawn

____ Watering of Garden

____ Filling of Swimming Pool

____ Other (please explain) _____

By signing below, you are guaranteeing that the seasonal water used will not be put down our sanitary sewer.

Signature: _____

Date Received: _____

Date Approved: _____