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| DPWB&W |  | **CITY OF BURLINGTON****DEPARTMENT OF PUBLIC WORKS****WATER RESOURCES**235 Penny Lane, Burlington, VT 05401P O Box 878, Burlington, VT 05402P: 802.863.4501F: 802.864.8233E: water-resources@burlingtonvt.gov**FINAL READING REQUEST FORM** |
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**EMAIL FORM TO:** **water-resources@burlingtonvt.gov**

**or FAX TO: 802-864-8233**

**Instructions:** You must be the seller or their representative to request a final meter reading. If the property is not being sold then do not fill out this form. Please complete all applicable fields and remit either via email or fax—incomplete forms will not be processed. Forms must be submitted at least 2 business days prior to requested meter reading date and the reading will be conducted on the date requested. If we are not open on the requested date then we will select the closest business day as the reading date. A fee of $30.00 per reading will be included on the final bill. We are not responsible for changes in closing dates, so if a final bill has already been processed then a new request will incur another fee.

**Today’s Date:** Click here to enter a date. **Requested Reading Date:** Click here to enter a date.

**Account #:** Click here to enter text. **Service Address:** Click here to enter text.

**Name of Property Owner(s):** Click here to enter text.

**Name of New Owner(s):** Click here to enter text.

**Mailing Address for New Owner(s):** Click here to enter text.

**Email and Phone for New Owner(s):** Click here to enter text.

**Name of Requestor:** Click here to enter text.

**Email and Phone for Requestor:** Click here to enter text.

**Please send final bill via: Email** [ ] Click here to enter text.

 **Fax** [ ]  Click here to enter text.

 **Mail** [ ] Click here to enter text.

**\*\*Final bills will be processed and sent prior to 4:30 pm on the date requested.\*\***

**FOR INTERNAL USE ONLY**

**Radio or Manual Id: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Meter Reading: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Field Employee Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Office Employee Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**