

BETHLEHEM TOWNSHIP FINAL BILLING REQUEST
4225 EASTON AVENUE BETHLEHEM PA 18020
PHONE: 610-814-6460 – FAX: 610-861-9641
**** REQUESTS RECEIVED MORE THAN 30 DAYS FROM THE SETTLEMENT DATE**
MAY NOT BE COMPLETED AND MAY BE RETURNED**

SETTLEMENT DATE: _____

SELLERS: _____

BUYERS: _____

SERVICE ADDRESS: _____

BUYER'S MAILING ADDRESS: _____
ONLY IF DIFFERENT THAN SERVICE ADDRESS

BUYERS' PHONE NUMBER: _____

*****MUST BE COMPLETED FOR CALCULATION:**

*****REQUESTED BY:** _____ *****PHONE NUMBER** _____

*****FAX NUMBER:** _____

***** CYCLE CODE:** _____ (Located on front of certification)

***** SEWER ACCOUNT NUMBER:** _____
(Located on front of certification)

***** FINAL WATER USAGE:** _____ (GALLONS OR CUBIC FEET?)

***** (PLEASE DO NOT GIVE METER READING)** (Located on final water bill)

***** EFFECTIVE WATER USAGE DATES:** _____ TO _____
(Located on final water bill) ***** Please fax final water bill if possible *****

*****PLEASE NOTE: YOU MUST SUPPLY US WITH THE USAGE AMOUNT FROM THE LAST WATER READING DATE THAT IS ON YOUR CERTIFICATION (BOTTOM OF CERT, QUARTERLY CHARGES DUE THROUGH DATE) TO YOUR FINAL WATER READING DATE.**

THANK YOU FOR YOUR COOPERATION.

FOR FINANCE DEPARTMENT USE ONLY:

LAST PAYMENT AMOUNT _____ LAST PAYMENT DATE _____

UNPAID ACCOUNT BALANCE _____

PRO-RATED CHARGES _____ THROUGH _____

TOTAL AMOUNT DUE _____

PREPARED BY _____