

## **WARE DPW**

## Water Division

4 ½ Church St, PO Box 89
Ware, Massachusetts 01082-1386
Tel. 413-967-9620 Fax 413-967-9622
jpopielarczyk@townofware.com
www.townofware.com



Todav's Date:

## **Water and Sewer Closing Form**

\*\*\*PLEASE TYPE or PRINT CLEARLY\*\*\*

## **Instructions:**

Attornev:

- Please submit this form at least five business days prior to the closing date.
- In some instances, a maintenance appointment may need to be scheduled in order to process the closing. The office will notify the requesting party of the Final Read if this is required.

PHONE:	FAX:	Closing Date:
9	SELLER'S INFORMAT	ION (Required)
Property Address:		
City, State, Zip Code:		Phone:
i	BUYER'S INFORMAT	iss days prior to the closing date.*  ION (Required)
		Phone:
F	INAL BILL <i>(For Ware</i>	DPW Use Only)
Account #		Make Check Payable to:
Final Bill \$		Town of Ware – Water Dept. PO Box 89, 4 ½ Church St.
(\$35 Final Meter Reading Fee incl	uded in Final Bill)	Ware, MA 01082