

Town of Castile Silver Lake Institute & Gardeau Water Districts Information Sheet

Information to be furnished by Property Owner:

Part I:	
Signature of Property Owner:	_____
Printed Name of Property Owner:	_____
Address of Property Owner:	_____ _____
Part II:	
Location of Property Served:	_____ _____
Part III:	
Signature of Person Served:	_____
Printed Name of Person Served:	_____
Address for Billing:	_____ _____
Phone number:	_____
Emergency number:	_____
For Office Use Only:	
Date Effective: _____	Beginning Reading: _____
Former Owner or Tenant:	_____

Please be aware that this office must be contacted regarding any address, owner or tenant changes, etc., **promptly** and new information sheets must be completed in order to change billing records. Thank you!

In the event that this property is sold, the owner of record is responsible for notifying the Town of Castile of changes. If the Town of Castile is not notified, the owner of record is responsible for all charges incurred at this location.

Please return this form to the Town of Castile for our Permanent records.

**Town Clerk
Town of Castile
53 N Main St, Box 179
Castile, NY 14427-0179**