



CITY OF LIMA

Department of Utilities

Customer Service

424 N. Central Ave.
Lima, Ohio 45801
Phone: 419-221-5252
Fax: 419-221-5208
www.cityhall.lima.oh.us

SIGNED RELEASE

SERVICE ADDRESS: _____ DATE: _____

_____ (INITIALS REQUIRED) BY THIS APPLICATION, CUSTOMER RECOGNIZES THAT THE CITY OF LIMA UTILITIES SHALL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE AS A RESULT OF THE RECONNECTION OF SERVICE. IF CUSTOMER DOES NOT INTEND TO BE PRESENT AT THE TIME WATER SERVICE IS CONNECTED (SHOULD SERVICE BE OFF), CUSTOMER SHALL INSURE THAT ALL INSIDE AND OUTSIDE OUTLETS (FAUCETS) AND VALVES ARE IN THE OFF POSITION. UNFORTUNATELY WE ARE UNABLE TO PROVIDE THE EXACT TIME OF SERVICE

_____ (INITIALS OPTIONAL) MAKE THIS A LONG-TERM SIGNED RELEASE AND ALLOW THE CITY OF LIMA TO RESTORE SERVICE ANY TIME THE WATER IS DISCONNECTED FOR ANY REASON. THE CITY OF LIMA UTILITIES SHALL NOT BE RESPONSIBLE FOR LOSS OR DAMAGE AS A RESULT OF RESTORATION OF SERVICE FOR THE LIFE OF THE CONTRACTUAL SERVICE.

SIGNATURE: _____