

Ph: 609-361-1000 ext: 6677 Fax: 609-361-8256

Taxoffice@LongBeachTownship.com

Final Water Reading Request Form

Requestor name & Agency: _____

Phone: _____

Email: _____ Fax: _____

Final Reading Address _____

(Street Address Only, Town and Zip not required)

Name of Current Owner: _____

Block: _____ Lot: _____ Qualifier: _____

How would you like the Final Water Reading sent: ___ Fax ___ Email ___ Phone

Reading Request Date: _____ **(Final reads will not be done more than 48hrs in advance)**

New Property Owner (Buyer) Name: _____

(Long Beach Township Use Only):

Final Read date: _____ Reading: _____

Calculation of Gallons: _____ Usage Costs _____

Base Rate Charge: Water- _____ Sewer- _____ plus Usage Costs: _____ =

Total Due _____