

CITY OF WOOD DALE

404 NORTH WOOD DALE ROAD WOOD DALE, ILLINOIS 60191-1596

l Mr./Mrs	have requested that the water be
turned back on at	(address) now that I have satisfied
my utility bill in full.	
I will not be h	ome at the time of turn on. I understand that the City will turn
on my water as soon as wo	ork schedule permits. I acknowledge that the City of Wood Dale
WILL NOT be held respons	sible for any damage due to leaking plumbing or fixtures being
left on.	
I wish to be h	nome at the time of the turn on. I will call the Public Works
Water Department at (630)	350-3542 to schedule an appointment. I understand that it
may take 24 to 72 hours fo	or the water to be turned on.
Resident Signature	
Clerk	
Date/Time	