DOVER TOWNSHIP
2480 W CANAL RD
DOVER PA 17315
PHONE: 717-292-3634  FAX: 717-292-2144

DOVER TOWNSHIP UTILITY SETTLEMENT FORM

Please complete the following information for settlement and e-mail it to us at: jmcclary@dovertownship.org; bscearce@dovertownship.org

or fax it to 717-292-2144.

SETTLEMENT COMPANY INFORMATION

Name: ______________________________  Company Name: ___________________________

Email: ________________________________  ______________________________________

Phone: _________________________________    Fax: _________________________________

WATER AND SEWER SETTLEMENT INFORMATION

Seller: ________________________________________________________________________

Buyer: ______________________________________    _____________________________

Phone number for Buyer: _________________________________________________________

Billing Address for Buyer: _________________________________________________________

Property Location: ____________________________________________________________________

Settlement Date: _________________________________

Please collect the following from Seller:

Account # ______________________________________

Final Water: __________________________    Final Sewer: _____________________________

Date Range of Services: ___________________________    Total from Seller: ________________

Please collect the following from the Buyer to establish the account:

Initial Water: __________________________    Initial Sewer: _____________________________

Date Range of Services : ___________________________    Total from Buyer : ________________

Total to be collected from both parties (if applicable): ________________________________