



WATER ADJUSTMENT FORM

(MUST BE CONNECTED TO SEWER TO QUALIFY)

DATE: _____

NAME: _____

ADDRESS: _____

PHONE #: _____

EMAIL ADDRESS: _____

ACCOUNT #: _____

FILL DATE: _____

NUMBER OF GALLONS: _____

This form can be mailed to the address below, dropped off at the Village Hall Dropbox or emailed to jonathoncouture@yahoo.com

SIGNATURE: _____

Village of Gifford

PO Box 37

Gifford, IL 61847

217.568.7256

Villageofgifford.com