



CITY OF AURORA ILLINOIS
APPLICATION FOR WATER SERVICE

All forms submitted require a valid photo ID for each applicant.

Applicant's First Name: _____ Last Name: _____

Service Address: _____
Street Address _____ City _____ State _____ Zip Code _____

Rent Provide a copy of the signed lease or rental agreement. (\$100 deposit required)
 Own Provide a copy of the deed or settlement statement papers.
 Senior (65 or older) (not applicable for renters)

Applicant's First Name: _____ Last Name: _____

State ID or Driver's license #(xxxx): _____

Additional Applicant's First Name: _____ Last Name: _____

Mailing Address: _____
Street Address _____ City _____ State _____ Zip Code _____

Home Phone _____ Cellular or Alternate Phone _____ Email _____
Paperless billing: _____

A normal billing cycle is approximately 60 days. Failure to receive a bill does not require the city to waive late penalties or preclude service termination.

There will also be a separate bi-monthly sewer bill from the Fox Metro Water Reclamation District. The City of Aurora will forward this information to them so there is no need to contact them regarding new service. If you would like to contact them for any other reason, they may be reached at (630) 301-6881.

In accordance with the existing City of Aurora ordinance, any consumer other than the property owner must place a \$100 deposit for water service. This deposit will be applied toward your final water charges upon vacating of said premises.

A 10% penalty will be added if payment in full is not received by the due date.

If water service is terminated, the customer must pay the outstanding balance in **FULL** plus a reconnection fee before service is restored.

When the city is unable to read a meter, a bill will be issued based on the account holder's estimated water consumption.

By signing below, I acknowledge that all the information provided is accurate and I have read and understand the above policies.

Signature

09/11/25

Office Use Only	
Account #: _____ - _____	
CSR (Initial): _____	
Date Completed: _____ / _____ / _____	

Date