



Village
of
**Forest
View**

7000 West 46th Street
Forest View, Illinois 60402
(708) 788-3429
Fax (708) 788-8266
info@forestview-il.org

Village President
Nancy L. Miller
Trustees
Richard M. Hubacek
Mike Grossi
Jim Sudkamp
David Liska
Maria A. Ramirez
Midalia Nevarez

WATER SERVICE APPLICATION

Please Print

Property Owner Name(s) _____

Service Address _____

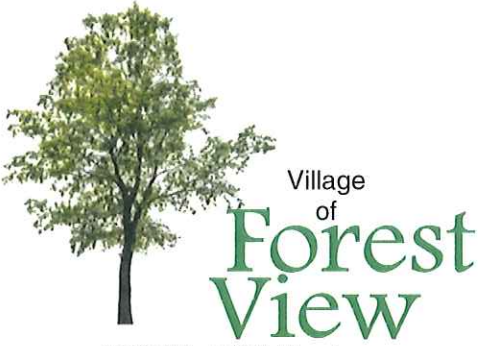
Billing Address (if different than above) _____

Telephone:
Home _____ Cell _____

Email Address _____

Closing Date _____

Signature _____



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AFFIDAVIT OF USE

The State of Illinois

County of Cook

Village of Forest View

I, _____, of _____,
(print name) (print address)

_____, IL, _____, and **ON MY OATH STATES THAT:**
(city/village) (zip code)

1. I am the legal owner/renter of _____ ("Premises") in the Village of Forest View.
2. I understand my Premises is located in the R Single Family Residence District as established by the Forest View, IL, Zoning Ordinance.
3. I understand Section 10, Chapter 2 of the Zoning Ordinance defines a Family as:
 - (A) Either one or more persons related by blood, adoption or marriage, living and cooking together as a single housekeeping unit, exclusive of household servants.
 - (B) Or not more than two (2) adult persons living and cooking together as a single housekeeping unit though not related by blood, adoption, or marriage.
4. The following individuals reside at the Premises on a fulltime basis:

<u>Name</u>	<u>Date of Birth</u>	<u>Relationship</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. The only unrelated adult person residing at _____
on a fulltime basis:

<u>Name</u>	<u>Date of Birth</u>
_____	_____

6. I am leasing space at my Premises _____
_____. YES ___ NO ___

7. If YES, I agree to provide a copy of the written lease or other written agreement between myself, the owner(s)/renter(s) and the unrelated adult person, OR the anticipated term or duration of such residency, if there is not a written lease or other written agreement. Private information such as social security numbers and amount of monthly rental, may be redacted.

8. I understand the failure to provide information regarding persons residing at _____
_____ to Officials of the Village of Forest View within thirty (30) days, at any time during my ownership or renting said Premises, will constitute a violation of Section 10-14-3 (D) of the Forest View Zoning ordinance.

(Signature of Owner/Renter)

SUBSCRIBED AND SWORN TO BEFORE ME, on the

_____ day of _____, _____

NOTARY PUBLIC

My Commission expires: _____