Final Water Reading Request Form

Please submit this form at least 24 hours in advance for a final water reading. Same day final readings cannot be performed.

Requestor: ________________________________ Phone: ___________________________
Email: ________________________________ Fax: ____________________________
Final Reading Address ________________________________________________
(Street address only, town and zip not required)
Name of current owner: ____________________________________________
Block: ____________ Lot: _______________ Qualifier: _______________
How would you like the final water reading sent:  ____ Fax  ____ Email  (select one)

Final Reading Date & New Owner Information

Reading Request Date: _________________________
(Reading date and closing date must be the same)

New Account Holder Name: ________________________________________
New Mailing Address: _____________________________________________

(Borough of Beach Haven Use Only):

Final Read date: ________________ Reading: __________________
Prior Read date: ________________ Reading: __________________
Calculation of gallons: ________________ Usage Costs __________ plus $126.50 = Total Due: __________
Minimum Charge: $126.50 covers Months of __ / __ / __ to __ / __ / __ Prior Due: __________ Grand total due: __________
Seller Portion: ________________ Buyer Costs: ________________ Total Due: ________________

Make check payable to: Beach Haven Water Department. Send a copy of this form with check.