



Kiski Valley Water Pollution Control Authority

1361 SCHOOL ROAD • LEECHBURG PA 15656

PHONE: (724) 568-3655

FAX: (724) 568-3554

Application for Duplicate Bill

Please complete the following application to be supplied with a duplicate of your Bill. This application will be reviewed by Management and if approved you will begin receiving a Duplicate Bill during the next billing period.

Please Note:

There will be a \$2 charge each billing cycle to receive your requested Duplicate Bill.

NAME: _____

ACCOUNT NUMBER: _____

SERVICE ADDRESS: _____

_____ PHONE _____

ADDRESS TO WHICH YOU WOULD LIKE DUPLICATE BILL MAILED:

I am submitting a request for a Duplicate Bill of my Kiski Valley Water Pollution Control Authority Bill to be sent to the aforementioned name and address. I understand that this request will be reviewed by Management of the Kiski Valley Water Pollution Control Authority and it can either be approved or denied by Management. If approved, I agree to be billed an additional \$2.00 per billing cycle. Management has the right to revoke this request at any time.

SIGNATURE: _____ DATE: _____

*****FOR OFFICE USE ONLY*****

Reviewed By; _____ Date: _____

Approved Rejected

Decision notification sent to applicant on Date: _____