



15440 South Central Avenue Oak Forest, Illinois 60452-2195  
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## UTILITY BILLING CUSTOMER WORK ORDER REQUEST

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Account #: \_\_\_\_\_

Billing  
Address: \_\_\_\_\_

\_\_\_\_\_

Home  
Phone: \_\_\_\_\_

Cell  
Phone: \_\_\_\_\_

Water Meter Reading: \_\_\_\_\_

Issue: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Owner: \_\_\_\_\_