

WAIVER

Date: _____ **Account Number:** _____

I, _____, hereby authorize the City of New Haven to

Reinstate / turn off services at: _____.

I will not hold the City of New Haven or any of its agents responsible if there are any problems because of reinstatement/disconnect of this water service.

_____ **I have given my permission for water to be shut off at the house.**

_____ **I have given my permission to turn water on at my own risk.**

_____ **See attached e-mail.**

Signature: _____ **Date:** _____