

**CITY OF EAST PROVIDENCE
DEPARTMENT OF PUBLIC WORKS
WATER UTILITIES DIVISION**

CLOSING STATEMENT REQUEST FORM FOR WATER/SEWER CHARGES (Please Print)

Property Address: _____

Seller's Name: _____ Date of Request: _____

Attorney/Realtor Requesting : _____ Date of Closing: _____

Phone No.: _____ FAX No. _____ or Email: _____

NOTE: A \$25.00 Closing Statement Fee Will Be Billed To The Account For This Service.

*******PAST DUE BALANCES ARE SUBJECT TO INTEREST AT 12% PER ANNUM*******

WATER UTILITIES DIVISION USE ONLY

Account No.: _____

DOMESTIC METER DEDUCT METER

Fire Acct.No: _____

Date Read: _____

Read By: _____

Current Read: _____

Prepared By: _____

Previous Read: _____

Consumption: _____

**Please Call Treasury @ 435-7544
for Interest.**

CHARGES (Consumption Since Last Billing)

Water Charge _____

RI Water Quality Surcharge _____

Sewer Charge _____

Sales Tax _____

Fire Service Charge _____

Other Charge(s) _____

Account Balance _____

Closing Statement Fee \$ 25.00 _____

****Total closing charges may not include
interest charges.**

TOTAL CLOSING CHARGES** _____

**Seller Owes/Buyer Owes ___ Yes ___ No Make Payable to City of East Providence, 145 Taunton Avenue
East Providence, RI 02914 Attention: Treasury**

INSTRUCTIONS!!! REQUEST MUST BE SUBMITTED SIX (6) DAYS PRIOR TO CLOSING.

Please fill out the top portion **only** of this form and FAX to our office at **401-435-7745** or email to **waterdept@cityofeastprov.com**. We will in turn complete the information and FAX/Email back to you. Any questions, please call 401-435-7741.

Revised 01-30-17