



# City of Mishawaka Trash Service Vacation and Vacancy Form

This form is to be used to:

1. Give the required 30 day written notice for vacation & vacancy.
2. To reaffirm vacancies each subsequent six (6) month period thereafter.

**Beginning the first billing cycle after thirty (30) days prior written notice to the Mishawaka Utilities Office by a customer, the City of Mishawaka shall discontinue Trash Service and charges to that Dwelling Unit if it will be unoccupied due to vacation or vacancy and trash services will not be utilized. At the time of such service interruption, Mishawaka Utilities may charge a fee equal to one-twelfth of the annual fee for up to a six month period for that Dwelling Unit. It shall be the responsibility of the customer to reaffirm each vacancy request each subsequent six (6) month period. Service and charges shall only be discontinued if the customer's account is current.**

Applicable rules from contract language above:

1. Accounts must be paid current in order to qualify for either the vacation or the vacancy program.
2. Accounts will be placed on vacation or vacancy beginning the first billing cycle 30 days after receipt of this form.

An administrative fee equal to one-twelfth of the annual fee will be assessed as a one time charge to activate both the vacation and the vacancy programs. Subsequent requests to continue the same vacancy will not incur this charge again as long as a new vacancy form reaffirming the vacancy is received by Mishawaka Utilities Office within 20 prior to expiration. Vacancies will automatically be canceled at the end of each vacancy period and dwelling units will be billed accordingly.

**Fraudulent misrepresentation of vacations or vacancies will be prosecuted to the fullest extent of the law.**

(Required Vacation/Vacancy Information)

Customer's Name: \_\_\_\_\_ Customer ID/Location # \_\_\_\_\_

Service Address: \_\_\_\_\_ Mishawaka, IN

Start Date of **Vacation**: \_\_\_\_\_ End Date of **Vacation**: \_\_\_\_\_

Start Date of or Reaffirmation Date of **Vacancy**: \_\_\_\_\_

I certify the above information is true. I will notify Mishawaka Utilities Office immediately when this residence is reoccupied or sold.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail to City of Mishawaka; 126 N Church St; Mishawaka, IN. 46544 or Fax (574)258-1710