

**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
Date Read: _____ Fire Acct.No: _____
Current Read: _____ Read By: _____
Previous Read: _____ Prepared By: _____
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@eastprovidenceri.gov**. We will in turn complete the information and FAX/Email back to you.
Any questions, please call 401-435-7741.

Revised Jan 2020