



VILLAGE OF STREAMWOOD  
FINANCE DEPARTMENT  
VACATION HOLD REQUEST

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_

DATE LEAVING: \_\_\_\_\_

DATE RETURNING: \_\_\_\_\_

CHECK ONE:

ACTIVATE MY ACCOUNT ON \_\_\_\_\_

I WILL CALL WHEN I RETURN

\*\* ANY WATER USED THAT HAS NOT BEEN BILLED AT THE TIME OF YOUR VACATION HOLD, AND THE MINIMUM CHARGES FOR EACH MONTH YOU ARE ON HOLD, WILL BE BILLED TO YOU WHEN YOUR ACCOUNT IS RE-ACTIVATED.

**IN CASE OF AN EMERGENCY, PLEASE CONTACT:**

NAME: \_\_\_\_\_

PHONE #: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_