



COVID-19 STATE OF EMERGENCY
SELF-CERTIFICATION FORM
FOR RESIDENTIAL CUSTOMERS
CHANGE IN FINANCIAL CIRCUMSTANCES

Account Number: _____

Name on Account: _____

Service Address: _____

Billing Address*: _____

*If different from Service Address

Telephone Number: _____

E-mail: _____

Certification:

Please read the following certification. Your signature is verification that you are stating this to be true:

I attest that due to COVID-19 State of Emergency, which began on March 7, 2020 and continued through June 23, 2021, I experienced a change in financial circumstances.

Signature

Date

Print name of person signing

Please return this form to the Town of Wallkill Water and Sewer Account Clerk
no later than December 8, 2021.