

City of Forman

PO Box 122 - 349 Main Street
Forman, ND 58032
(701) 724-3673
auditor@formannd.com



Step 1: Please enter your information below.

Customer Account Information			
Name:			
Physical address:			
City:	State:	ZIP Code:	
Account number:			
Emergency Contact Information			
Email Address:			
Winter Residence Address:			
City:	State:	ZIP Code:	Phone:
Local Contact Person (to check on residence):			

Step 2: Tell us what you would like us to do.

Place account in vacation mode.

I understand I will be billed a flat rate of \$35 per month while I am gone.

Turn water off completely (if available).

I understand I will be billed a \$25 fee for shut off, which is due before I leave, and a \$25 fee payable in advance, to turn the service back on when I return. This option is not available to all residents.

Step 3: When are you going to start and return from vacation?

Vacation Start Date:

Vacation End Date:

Please note: Start date must be at least 7 calendar days from today's date but not more than 30 days from today's date. Return date must be at least 60 days but not more than 270 days from your start date.

Signature