

PHONE NO.: (509) 684-5091

CITY OF COLVILLE
Treasurer's Office
170 S OAK ST
COLVILLE WA 99114

FAX NO.: (509) 684-5030

CLOSING / FINAL BILLING

Please allow at least 48 hrs. for us to obtain a meter reading and calculate the final billing amount!!

The Section to be completed by Closing Agent

Closing Agent: _____ Date: _____
Closing person's name: _____
Closing Agent Phone No.: _____ FAX No.: _____

Property Service Address: _____

Seller's Name: _____ Phone No.: _____

City, State, Zip Code: _____

Actual Closing Date _____
(If you need an estimate please call 684-5091 or email dtreas1@colville.wa.us prior to closing)

Buyer's Name: _____

Mailing Address: _____ Phone No.: _____

Who is paying the final closing bill? Closing Company Seller Buyer
Other _____

NOTE:
If the seller/closing company is not paying for the closing bill, please notate above and provide written documentation as appropriate.

PLEASE ENSURE THIS FORM IS FILLED OUT IN ITS ENTIRETY

*******IMPORTANT INFORMATION*******

All water/sewer accounts that are off (non-pay, intermittent service, extended service interruption, etc) will be billed all fees to have service restored.

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This Section to be completed by City of Colville

Water/Sewer Account Number: _____ LID Amount Owed: _____
Final Water/Sewer billing through: _____
Total Due: _____