

EXHIBIT A
VILLAGE OF PAYNE – WATER SERVICE SHUTOFF REQUEST FORM

Contractor / Company Information

- **Company Name:** _____
- **Contact Person:** _____
- **Phone Number:** _____
- **Email Address:** _____

Project Information

- **Project Location (Address):** _____
- **Type of Work Being Performed:**
 - Water Line Repair
 - New Connection
 - Utility Work
 - Other: _____
- **Description of Work:**

Shutoff Request Details

- **Requested Shutoff Date:** _____
- **Requested Shutoff Time:** _____
- **Estimated Duration of Shutoff:** _____

Advance Notice Requirement

- I acknowledge that this request is being submitted at least **24 hours in advance** of the requested shutoff time.
- I understand that all shutoffs must be performed **only by the Village Water Operator or authorized personnel**.

Emergency Contact (Required)

- **On-Site Contact Name:** _____
- **On-Site Phone Number:** _____

Contractor Acknowledgment & Liability

By signing below, the contractor acknowledges and agrees:

- Not to operate valves or tamper with the Village water system
- To comply with all Village of Payne ordinances and policies
- To be responsible for any damage to water infrastructure caused by this project
- To coordinate all excavation with **811 (OUPS)** prior to digging
- To notify the Village when work is complete and ready for service restoration

Contractor Signature

Signature: _____

Printed Name: _____

Date: _____

Village Use Only

- **Request Received By:** _____
- **Date/Time Received:** _____
- Approved
- Denied
- Rescheduled
- **Approved Shutoff Date/Time:** _____
- **Operator Assigned:** _____
- **Notes / Special Instructions:**

Water Operator Signature

Signature: _____

Date: _____