

CITY OF NEWARK WATER DEPARTMENT  
34 S. 5<sup>th</sup> Street  
Newark, Ohio 43055  
(740) 670-7940

Department Mailing Address  
P.O.Box 4100  
Newark, Ohio 43058-4100

DENIAL OF SERVICE

To: \_\_\_\_\_  
(Insert Name of Applicant)

Date: \_\_\_\_\_

Your application for water service at: \_\_\_\_\_ is denied for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We will agree to provide water service at that address under the following conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If you disagree with this decision or the conditions we ask, you may request a hearing to appeal this denial. If you request a hearing, you have the right to examine water department records concerning this denial; to bring a representative to help you with the hearing; and to bring witnesses to testify at the hearing. You may request a hearing by returning the attached hearing request.

\_\_\_\_\_  
Signature of Employee

Notice: The Federal Equal Credit Opportunity Act prohibits creditors from discrimination against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant

has a capacity to enter into a binding contract) or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The federal agency that administers compliance with this law is the Federal Trade Commission, Equal Credit Opportunity, Cleveland Office, telephone number (216) 522-4207.

Ohio laws against discrimination require that all creditors make credit equally available to all credit-worthy customers, and that credit reporting agencies maintain separate credit histories on each individual upon request. The Ohio Civil Rights Commission, 220 Parsons Avenue, Columbus, Ohio 43266, telephone number (614) 466-5928, administers compliance with this law.

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Hearing Request

I hereby request a hearing to contest the denial of my water services.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Print Name

Mail this form within 5 working days to:

\_\_\_\_\_  
Address

City of Newark Water Department  
P.O.Box 4100  
Newark, Ohio 43058-4100

\_\_\_\_\_  
Telephone Number