

**VILLAGE OF CHAMPLAIN  
11104 ROUTE 9  
CHAMPLAIN, NY 12919  
WATER/SEWER WORK ORDER REQUEST**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

SUMMARY OF ISSUE:

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WORK ASSIGNED TO: \_\_\_\_\_  
DATE: \_\_\_\_\_

SUMMARY OF WORK DONE:

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