

SMALL BUSINESS DIX HILLS WATER DISTRICT CUSTOMER
COVID-19 STATE OF EMERGENCY
CHANGE OF FINANCIAL CIRCUMSTANCES SELF-CERTIFICATION FORM

Account Number: _____

Property Owner: _____

Service Location: _____

Billing Address*: _____

*If different from service location

Home Phone : _____

Cell Phone: _____

Email: _____

Date: _____

By my signature below, I attest that due to the COVID-19 state of emergency, which began on or after March 7, 2020, the business that I own or am an officer of has experienced a change in financial circumstances, relating to the period March 7, 2020 through June 23, 2021, and that (i) the business currently has twenty-five or fewer employees; (ii) the business is not a publicly held company, or a subsidiary thereof; and, (iii) the business is not a seasonal, short-term, or temporary customer of the DHWD.

Signature

Print Name of Person Signing

Instructions

This form may be emailed, faxed or mailed to the Dix Hills Water District:

Email: DHWD@huntingtonny.gov

Fax: 631 - 421 - 2222

Mail: Dix Hills Water District, 683 Caledonia Road, Dix Hills, NY 11746

If you have questions you may call: 631-421-1812