



## READING YOUR OWN METERS FORM

Use this form to to read your own meters and report your findings to the CWLP Customer Service Office.

1. To ensure you will be able to successfully use this form, your computer should be equipped with Adobe Acrobat or Acrobat Reader 8.0 or higher. You might not be able to print or submit the form using an older version of Acrobat. [Download the most recent version of Acrobat Reader \(free\)](#).
2. After opening the form, complete all appropriate fields. (Fields identified by an asterisk must be filled in before you will be allowed to print or submit the form.)
3. If you wish to clear the data you have input into all of the fields, click the RESET FORM button at the bottom of the form.
4. If you wish to submit the form electronically, click the SUBMIT FORM button at the bottom of the form. A pre-addressed email message box containing your attached form will open. Now all you have to do is send the email.
5. If you wish to print the form and submit it manually, you can mail or fax it to:

CWLP Customer Service Office  
Room 101  
Municipal Center West  
Springfield, IL 62757

FAX: (217) 789-2026

6. If you have questions about this form or about your CWLP account, call the Customer Service Office, 789-2030, or email [publicinformation@cwlp.com](mailto:publicinformation@cwlp.com).



# CUSTOMER METER READING

Please be sure to READ THE INSTRUCTIONS for printing and/or submitting this form electronically BEFORE you proceed.

Asterisks indicate fields that must be filled in.

## Customer name

Last Name\*

First Name\*

Initial

## Address

Street Address\*

Unit #

City\*

State\*

ZIP Code\*

Daytime phone number\*  Area Code   -   Extension

Email address

Account number

**Electric meter** (begin with dial furthest to your left and read clockwise; if you have a four-dial electric meter, leave the *Dial 5* space blank)

	<small>Dial 1</small>	<small>Dial 2</small>	<small>Dial 3</small>	<small>Dial 4</small>	<small>Dial 5</small>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Water meter** (complete only if you have a Digital Readout Water Meter)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Water meter** (complete only if you have a Dial-type Water Meter)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Read date\*  Month  Date  Year

If you are having difficulty printing or submitting this form, it is likely because your computer is not equipped with an appropriate version of Adobe Acrobat. Please refer back to the instruction page.