



CRITICAL WATER USER APPLICATION

The City of Bedford will reference our critical water user List when dealing with unplanned emergencies and/or scheduled service disruptions and will make provisions to minimize the impact of such events on critical users. Not all submitted applications are subject to approval.

Please complete and submit the following form to the City of Bedford.

Name of Facility or Resident:
Address:
ECP (Emergency Contact Person):
ECP Phone Number:
Email Address:
Do you have backup water systems / supplies? If yes, please describe.
Brief description as to why you are considered a critical water user:
*Please provide written documentation from your medical provider if critical user has a medical condition.
Signature:

Please know that inclusion on this critical water user list is not a guarantee of notification as some water emergencies may occur without warning. Ensure that you keep a supply of water on hand to meet your needs in the event that water supplied by The City of Bedford is unavailable.

Submit completed application to: jsokolowski@bedfordoh.gov
Subject – Critical User