



WATER AND SEWER APPLICATION

Zoning District

Project Address:	
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APPLICANT NAME:		PHONE		EMAIL	
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PROPERTY OWNER INFORMATION					
Name					
Mailing Address					
City		State		Zip Code	
Phone Number			Alternate Phone		
Fax Number			Email Address		

CONTRACTOR INFORMATION					
City of Tallmadge Contractor Registration # _____					
Contractor working in the right-of-way is required to register with the City					
Name					
Mailing Address					
City		State		Zip Code	
Phone Number			Alternate Phone		
Fax Number			Email Address		

<p>NEW WATER TAP-IN:</p> <p><input type="checkbox"/> 1" Tap (1/2" x 5/8" Meter) \$ 1800</p> <p><input type="checkbox"/> 2" Tap (2" Meter or Smaller) \$ 2500</p> <p>WATER METER ONLY:</p> <p><input type="checkbox"/> Deduct Meter \$ 170</p> <p><input type="checkbox"/> Well Meter \$ 250</p> <p><input type="checkbox"/> 5/8" Meter \$ 170</p> <p><input type="checkbox"/> 1" Meter \$ 318</p>	<p>SEWER:</p> <p><input type="checkbox"/> Residential \$ 60</p> <p><input type="checkbox"/> Commercial \$ 100</p>
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THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, AND CONSENTS TO AGENTS OF THE CITY ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED IF THIS APPLICATION IS APPROVED.

_____ I UNDERSTAND THAT I MUST CONTACT THE CITY OF TALLMADGE WATER AND SEWER DEPARMENT 330-633-0851 FOR ALL INSPECTIONS.

_____ I UNDERSTAND THE CITY OF TALLMADGE DOES NOT ALLOW WATER METER PITS TO BE INSTALLED WITHIN THE DRIVEWAY.

Applicant Signature: _____

Date: _____

City of Tallmadge Approval: _____

Date: _____