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## WATER SERVICE CONNECTION APPLICATION

Mains Pressure

Restricted Flow

Application is made herewith for a Domestic/Commercial Water Service to the following land:

### **PROPERTY DESCRIPTION/OWNER**

Lot: \_\_\_\_\_ Section: \_\_\_\_\_ DP: \_\_\_\_\_

Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

### **PLUMBER DETAILS**

Name: \_\_\_\_\_ Licence Number: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

### **METER LOCATION**

**Please mark location - Relevant to Street**

Size of Service Requested: \_\_\_\_\_mm

Street Service is fronting: \_\_\_\_\_

### **SIGNATURES**

 **Owner:** \_\_\_\_\_

 **Plumber:** \_\_\_\_\_



**OFFICE USE**

<b>DA/CD No:</b> _____	<b>DSP:</b> _____	<b>\$</b> _____
<b>WSC No:</b> _____	<b>Application Fee:</b> _____	<b>\$</b> _____
<b>CAP No:</b> _____	<b>Standard Connection Fee:</b> _____	<b>\$</b> _____
	<b>Quoted Fee:</b> _____	<b>\$</b> _____
	<b>TOTAL CONNECTION FEE:</b> _____	<b>\$</b> _____
	<b>Receipt No:</b> _____	_____

**WATER DEPARTMENT**

Copy of Application to Water & Sewer Coordinator	_____	<b>Date:</b> _____
Copy of Plumbers Doc to Water & Sewer Coordinator	_____	<b>Date:</b> _____
Plumber Doc No:	_____	<b>Date:</b> _____
Location of Meter:	_____	
Size of Service :	_____	
Water Meter No:	_____	<b>Connection Date:</b> _____
Water Meter Reading:	_____	

**RATES DEPARTMENT**

WSC Application Received:	_____
Property Key:	_____
Rates Assessment No:	_____
Water Rates Assessment No:	_____
Run No:	_____
Sequence No:	_____
Data Entered By:	_____
Date Entered:	_____

**NOTES**

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