

TOWN OF ROYALTON
APPLICATION FOR WATER / SEWER SERVICE
(Please complete both sides of application)

Date of Application: _____

Name: _____ Phone #: _____

Service Address: _____

Present Address (if different): _____

Meter:	_____ 3/4 inch - \$ 300.00	Water Tap In:	_____ 3/4 inch - \$1,100.00
	_____ Larger Meter call water dept (1; 1 1/2; 2 inch for pricing)		_____ 1 inch - \$1,200.00
			_____ 1 1/2 inch - \$1,300.00
Sewer Tap In:	_____ \$ 1,000.00		_____ 2 inch - \$1,400.00

It is understood by the petitioner that, in making this application, all Rules and Regulation of the Town of Royaltton Water Improvement are hereby agreed to. This includes giving access to the Water Department at any given time for inspection and/or replacement of your meter if it is felt it may no longer be functioning efficiently. The petitioner respectfully requests approval of this application so the service can be commenced on or about _____

Date Paid: _____ CK _____ CA _____ MO

By signing this application I agree to the above terms and conditions.

Respectfully submitted,

Approved _____

Disapproved _____

Faxed to Water Department: _____ By: _____
Date

INFORMATION ON APPLICANT:

RACE: Please choose appropriate category

SEX: (of the applicant)

Hispanic or Latino _____

Male _____

American Indian/Alaskan Native _____

Female _____

Asian _____

Black or African American _____

Native Hawaiian or Other Pacific Islander _____

Person of 2 or more Races _____

White _____

Other _____

Instructions: If applicant does not comply employee must complete form to the best of his/her ability.