

**EDDYVILLE WATER DEPARTMENT
UTILITY PERMIT**

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Location of Service: _____

Phone Number: _____ Social Security Number or EIN: _____

Employer _____ Phone No. _____

Contact Number and name of someone who could get in contact with you _____

Meter Service

Permanent Residential: _____ Seasonal Home: _____ Business : _____

Rental: _____ Other: _____

Type of Service Requested

Water : _____ Standard 3/4" Tap
Sewer: _____ Standard 6" Tap
Garbage: _____ Residential Service
Garbage: _____ Dumpster – 2YRD ___ 4YRD ___ 6YRD ___ 8YRD ___ Rolloff ___
1XW ___ 2XW ___ 3XW ___ 4XW ___ EOW ___

CHARGES

Water Tap Fee \$600.00 or actual cost
Sewer Tap Fee \$500.00 or actual cost
Road Bore Fee \$125.00 - First 4 hours

****A COPY OF THE PLUMBING PERMIT FROM THE HEALTH DEPARTMENT IS REQUIRED FOR ALL NEW SERVICE CONNECTIONS.**

WATER METER DEPOSIT \$150.00

TOTAL CHARGES \$ _____

I have read and understand the rules and regulations of the Eddyville Water and Sewer System of the City of Eddyville, and hereby agree to comply with the requirements therein.

Date _____ Signature _____

FOR OFFICE USE ONLY

Initial Reading _____ Rates W _____ S _____ G _____

Account Number _____ Approved by _____