

Customer Number _____
Inspection/Permit Fee _____
Tap-In Fee _____

Lot Number _____
Owner's Name _____
Book # _____ Page # _____

TOWN OF SANTA CLAUS WATER UTILITY
PO BOX 92, SANTA CLAUS, IN 47579

PERMIT FOR WATER CONNECTION

Name of Property Owner _____ Date _____

Mailing Address _____

The property owner agrees to the terms and conditions as set forth below:

To be billed the minimum monthly rate on water as soon as the connection has been made and pay the rates based upon actual usage, if more than the minimum amount of water is metered.

Will pay the tap-in fee for the installation of the water connection (where applicable). This connection may not be covered until the connection and materials used have been inspected. Inspection of new residential services will be assessed a \$25.00 inspection fee and new commercial services will be assessed a \$35.00 inspection fee. The water meter will be furnished by the town along with external meter readout. The meter is to be installed by the plumbing contractor inside the house in an accessible area not subject to freezing. The external cable should be installed from the meter to the readout which should be three (3) feet from ground level. The meter must be put in a horizontal position. Valves must be installed before and after the meter. The customer will be responsible for the cost of repairs made to the meter due to freezing and/or bursting.

The town will tap the main water line and will provide a curb stop at your property line. Your installation of the service line and water meter is to be inspected and approved by the town before being covered.

REQUEST FOR LOCATION / MATERIALS / INSPECTIONS MUST BE MADE AT LEAST 24 HOURS IN ADVANCE.

THIS PERMIT EXPIRES ONE YEAR FROM THE DATE OF THIS APPLICATION.

Applicant's Signature _____ Date _____

Utilities Superintendent _____ Date _____

OFFICE USE ONLY

Date of temporary service _____
Date Meter Issued _____ Type _____ Size _____
Meter Number _____ Register Number _____ Reading _____

Plumbing Contractor _____ License# _____

Inspector _____

Comments _____