



Utility Service Verification

Applicant Name: _____

Applicant Phone: _____

Applicant Mailing Address: _____

Applicant Signature _____ Date: _____

Service Request Location:

- Tax Map #: _____
- Subdivision / Lot : _____
- Street Name / Number : _____

Utility Services Requested:

- Water
- Size of water tap request : _____
 - Special request : _____
 - Is water service available at this location? Yes No
 - Water Department representative signature: _____ Date: _____
 - Comments : _____

- Sewer
- Size of sewer tap request : _____
 - Special request : _____
 - Is sewer service available at this location? Yes No
 - Sewer Department representative signature: _____ Date: _____
 - Comments : _____

- Electric
- Electric load request : _____
 - Special request : _____
 - Is electric service available at this location? Yes No
 - Electric Department representative signature: _____ Date: _____
 - Comments: _____
