TOLEDO CITY WATER DISTRICT

SERVICE APPLICATION

APPLICANT : _____

SA # / ACCT #: _____

ADDRESS : _____

CONTACT NO.: _____

SERVICE : _____

I HEREBY APPLY FOR A WATER SERVICE CONNECTION SIZE _____ TO BE LOCATED AT _____

I UNDERSTAND THE CONNECTION WILL NOT BE MADE UNTIL IT IS APPROVED AND ALL BASIC CHARGES ARE PAID. I ASSUME RESPONSIBILITY FOR THE METER AND ALL WATER THAT PASSES THRU THE CONNECTION. I WILL CONFORM TO THE RULES AND REGULATIONS OF THE TOLEDO CITY WATER DISTRICT.

_____ APPLICANT'S SIGNATURE

_____ DATE

SKETCH OF LOCATION OF PROPOSED SERVICE

ZONE : _____

BOOK : _____

ROUTE : _____

NEXT TO : _____

USERS COUNT : _____ persons

SITE INSPECTION

CLASSIFICATION

☐ RESIDENTIAL

COMMERCIAL

☐ Full ☐ A ☐ B ☐ C

LINE STATUS

☐ NONE ☐ WITH PREVIOUS LINE

Acct # _____

TYPE OF TAPPING

☐ CLUSTER TAPPING ☐ CLAMP TAPPING

☐ NEEDS CLUSTER STAND

☐ ELECTRIC ☐ TEE TAPPING

DISTANCE FROM TAPPING LINE TO HOUSEHOLD (m): _____

LOCATION OF TAPPING OUTLET:

Landmark/s: _____

Nearest mtr #: _____

INSPECTED BY:

_____ Signature over printed name

DATE OF INSPECTION

_____

ORIENTATION - SEMINAR

DATE : _____

PAGE / NO. : _____

ATTENDED BY : _____

FACILITATOR : _____

ID / DOCUMENTS SUBMITTED

_____

_____

_____

_____

CERTIFIED READY:

BY : _____

SIGNATURE : _____

PLUMBER : _____

DATE / TIME : _____

CHARGES DUE: AMOUNT: OR NO.: ISSUED BY:

TOTAL AMOUNT

RECOMMENDING APPROVAL :

_____ DIVISION MANAGER - COMMERCIAL

APPROVED BY :

_____ GENERAL MANAGER

SRS NO. _____

DATE ISSUE: _____

METER No. _____

BRAND: _____

MATERIAL: _____

CONDITION: _____

INSTALLED BY :

_____ PLUMBER

_____ DATE

_____ INITIAL READING

METER

ISSUED BY:

_____

DATE :

_____

RECEIVED BY:

_____