



*Plant your family here.*

215 North West Street  
 Perryville, MO 63775-1327  
 Phone: 573-547-2594

E-Mail: [buildinginspectors@perryvillemo.gov](mailto:buildinginspectors@perryvillemo.gov)

**OFFICE USE ONLY**

SUBMITTAL DATE \_\_\_\_\_

PERMIT # \_\_\_\_\_

FEES PAID \_\_\_\_\_

INSPECTED DATE \_\_\_\_\_

INSPECTED BY \_\_\_\_\_

**WATER/SEWER SERVICE APPLICATION**

The undersigned of the following described premises (herein called "Applicant"), located at

\_\_\_\_\_

hereby applies for a connection to the water and/or sewer system of the City of Perryville.

**APPLICANT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **PHONE NUMBER:** \_\_\_\_\_  
 \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**PROPOSED CONNECTION:** CITY WATER CITY SEWER

**DATE OF PROPOSED CONNECTION:** \_\_\_\_\_

**APPLICATION BEING MADE ON BEHALF OF:** \_\_\_\_\_  
 PROPERTY OWNER

**WATER PERMIT FEE \$** \_\_\_\_\_ **SEWER PERMIT FEE \$** \_\_\_\_\_

**PRIVATE UNDERGROUND UTILITIES PRESENT?** YES NO *IF YES, SEE PRIVATE UTILITY WAIVER*

In consideration of the granting of this permit application, the undersigned agrees:

1. To furnish any additional information relating to the construction and connection to the Water/Sewer system of the City, for which this permit is sought, as may be requested by the Water & Sewer Superintendent.
2. To accept and abide by all the provisions of Ordinance No. 1097 of the City of Perryville, Missouri.
3. To cooperate at all times with the Superintendent of Water & Sewage Works, and his representative in their inspecting, sampling, and study of sewage waste, and any facilities provided for pre-treatment.

\_\_\_\_\_  
**SIGNATURE OF APPLICANT** **APPLICATION DATE**

\_\_\_\_\_  
**REPRESENTATIVE OF THE CITY OF PERRYVILLE**

