



Plant your family here.

215 North West Street
Perryville, MO 63775-1327
573-547-2500 Phone; 573-547-6474 Fax
E-Mail: rayjackson@cityofperryville.com

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

SEE CITY ORDINANCE FOR TRACER WIRE REQUIREMENTS. ANY MO ONE CALL VIOLATIONS WILL BE ISSUED A CITATION FOR MUNICIPAL COURT, AND THE DIGGER IS LIABLE FOR DAMAGES.

