

**NORTH FAYETTE TOWNSHIP  
APPLICATION FOR USE OF SANITARY SEWERS  
MONTOUR RUN INTERCEPTOR SYSTEM**

I hereby make application for use of the sanitary sewer system and agree to be governed by the Rates, Rules and Regulations as adopted by the Township, which are made part of this application with the same effect as if physically attached to it, and further agree that I shall not permit surface or roof drainage to be connected to, or enter, the sanitary sewer system from the described premises.

Property Owner \_\_\_\_\_

Addressed to be serviced \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Applicant \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Public sewer connection requested for:

|                     |       |                    |       |
|---------------------|-------|--------------------|-------|
| Single Family Home  | _____ | Duplex             | _____ |
| Townhouse           | _____ | No. of Units       | _____ |
| Apartment Building  | _____ | No. of Units       | _____ |
| Commercial Building | _____ | Annual Water Usage | _____ |

Is premise served by public water usage.      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Connection Fee \_\_\_\_\_      Assessment \_\_\_\_\_

**I AGREE TO PAY THE ABOVE CHARGES FOR SANITARY CONNECTION  
AND ANY ASSESSMENT INDICATED.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

=====  
**For Office Use:**

Connection Fee Paid \_\_\_\_\_      Date \_\_\_\_\_

Connection Made \_\_\_\_\_      Date \_\_\_\_\_

Assessment Paid \_\_\_\_\_ Date \_\_\_\_\_

Inspected By \_\_\_\_\_ Date \_\_\_\_\_