

CENTERVILLE OSTERVILLE MARSTONS MILLS WATER

ACCOUNT#_____

DEPARTMENT PO BOX 369 1138 MAIN STREET, OSTERVILLE 508-428-6691 COMMWATER.COM

DATE:_____

WATER SERVICE APPLICATION

Assessor's Map	p No Lo	ot No	
Modify existing	g Service-explain:		
I hereby make a	application for water service at		
and agree to abi	ide by the rules of COMM Water Departm	nent.	
Name of Owner	er as per Deed:		
Billing Address	S:		
Telephone:		Email:	
service lines loc located with 4 f Connections wi be turned on un connected to an	cated within 10 feet of any cesspool, cessp feet of electric, gas or telephone lines, or t ill be made to water services lines that me ntil all assessed charges are paid in full. On my portion of the building's water supply s	pool drain lines, or sewer. o water service lines which et AWWA specification P nly District personnel are t ystem.	E 3408 or equivalent. (200PSI Min) No water will to turn on water services. No private well may be
Owner's Service Installer		(fro	m the approved list)
Please provide	a drawing plan of existing conditions (sep	tic, private lines, well etc.)
System Develop	pment Charge: \$		
Owner's Signat	ture:		
• W	Vill a Fire Sprinkler System be installe • Are there chemical additives?	d? \Box YES \Box NO \Box YES \Box NO	pumper connection(s)? YES NO
	• Type of approved device install	led*	
	• Degree of hazard \Box HIGH \Box M	IODERATE □LOW	
• W	Vill a Lawn Sprinkler be installed?	YES 🗆 NO	
	• Type of approved device* \Box RPZ \Box DCVA \Box PVB		
• Is	the dwelling currently on a private w	ell? □YES □ NO	
	○ Is it connected? \Box YES \Box NO)	