

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 |) | |