

# Town Of Willsboro- Water District Application for Water Connection

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Location of property for water connection: \_\_\_\_\_

\_\_\_\_\_

Tax Map No. \_\_\_\_\_

Purpose for water: \_\_\_\_\_

Size of connection needed: \_\_\_\_\_

I, \_\_\_\_\_, hereby agree to the following rules and regulations:

1. To abide with the policy of the Water District
2. To agree to the inspection of the lines to be furnished by the Water Operator
3. And that the water will not be in use until the approval

\_\_\_\_\_  
Applicant

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Fee paid by cash: \_\_\_\_\_ or check: \_\_\_\_\_ check #: \_\_\_\_\_

Date accepted: \_\_\_\_\_ Date inspected: \_\_\_\_\_

\_\_\_\_\_  
Water Plant Operator

\_\_\_\_\_  
Administrative Officer

\_\_\_\_\_  
Code Enforcement Officer

\*\*\*\*Amount of \$1,500 dollars will need to be paid prior to the connection\*\*\*\*