

CITY OF WAITSBURG
P.O. Box 35, 147 Main St.
Waitsburg, WA 99361
Phone: 509-337-6371 Fax: 509-337-8089

APPLICATION FOR UTILITY SERVICE(S)

Date of Application: _____

Applicant Name: _____

Mailing Address: _____

P.O. Box or Street City State ZIP

Telephone: _____ Service Address: _____

Property Owner: _____

Number of People in Household: _____

If an existing service, date to be turned on: _____

Type of Service: Commercial (Business) _____ Residential _____

If applicable, type of business:

____ Service Station ____ Public Works ____ Fraternal Hall ____ Club
____ Restaurant ____ Tavern ____ Church ____ Other _____

Check all that are applicable:

1. ____ Water Connection:
 ____ Existing Service ____ New Service

2. Size of Water Meter Connection:
 ____ 3/4" ____ 1" ____ 1 1/2" ____ 2" ____ 3" ____ Other _____
(If this is an existing service and you are unsure of meter size, please ask for assistance at City Hall)

A water deposit is payable at the time of application. The amount of the deposit is based on the water meter size. Any deposit or unused portion of a deposit may be refunded after 12 months providing that the following conditions are met (Ord. No. 20000119-790):

- The deposit was made for the purpose of securing payment of charges for utility services rendered to that person.
- The person has satisfied all obligations to pay for utility services provided to that person.
- The person requests refund of the deposit (applications are available at City Hall).
- Utility services to the person have been terminated at the request of the person.

- Or, more than 12 months have elapsed since the deposit was made and the person has had, for the 12-month period prior to the request, no delinquency or default on the account.

All water utility customers are required to comply with the City of Waitsburg’s Cross-Connection Control Program (Ord. No. 20011117-824).

3. _____ Sewer Connection:

_____ Existing Service _____ New Service

4. _____ Solid Waste Collection Services (Garbage Services):

If a commercial business, desired size of solid waste (garbage) collection receptacle:

_____ 60-gallon _____ 105-gallon _____ 300-gallon _____ Other

(A 105-gallon garbage receptacle will be the standard size receptacle provided to residential units. Upon request, a 60-gallon container will be available at a rate of \$13.06 per month.)

The following must be submitted with this completed application form to be accepted:

- Fees:

_____ Application fee in the amount of \$3.00

_____ Water Deposit Fee

_____ ¾” meter - \$81.30

_____ 1” meter - \$89.10

_____ 1 ½” meter - \$99.90

_____ Other _____

_____ If applicable, new service fees

(If this is an application for a new service and the application is approved, the applicant will be responsible for a plumbing permit fee, system connection fee(s) and installation fees. Installation of services includes extension from the City’s main line to the applicant’s property line. These fees will be calculated upon approval of application and are due payable prior to installation of service(s)

Applicant acknowledges that they have read and understood the terms of Ord. No. 991215-783, which pertains to connection fees).

- A legal description of the property.
- If this is an application for a new service(s), a site plan that includes the dimensions of the property and a location on the property that the applicant would like the water/sewer service(s) extended to. The services will be extended from the City’s main line to applicant’s property line only.

Owner/Applicant Signature

Date

For Office Use Only:

Date application received: _____

Received by: _____

Is application complete?

- Appropriate spaces filled out?
- Site plan attached?
- Site plan complete?
- Application fee paid?
- Water deposit fee paid? Amount: _____
- If existing service, water meter read for new tenant? _____
- If applicable, system(s) connection fees paid? Date _____

Application complete: _____

If no, explain: _____

Is service area located in a special flood hazard area? Yes _____ No _____

Do tap-in restrictions apply? Yes _____ No _____

Does cross-connection control apply? Yes _____ No _____

Explanation: _____

Is service within City Limits? Yes _____ No _____

Comments: _____

Please attach a copy of plumbing permit fees, system connection fees and installation fees.

Application approved: _____ Date: _____