

## **Town of Carthage**

## Installation of New Water/Sewer Service Permit Application

Date:	LRK#:								
Service Address:									
Applicant Name:			erty Owner:						
Applicant Phone:		_ Appl	icant Email:						
Type of Account		Serv	Service & Meter Size Requested						
Single Family Residential			🖵 Water	○ ¾"	<b>O</b> 1″	O 1½"	<b>O</b> 2″		
Number of bedrooms			Sewer	<b>O</b> 4"	<b>O</b> 6″				
Multi-Family Residential			Irrigation	○ ¾"	<b>O</b> 1″	O 1 ½"	<b>O</b> 2″		
Commercial			Other						
Other		-							

## FOR OFFICE USE ONLY

	١	Water	Sewer		Irrigation		Fire Control	
Service Available	🖵 Yes	🗖 No	🖵 Yes	🗖 No	🖵 Yes	🗖 No	🛛 Yes	🗖 No
Meter Size								
Pre-Installed	\$		\$		\$		\$	
Tap Fee	\$		\$		\$		\$	
System Development Fee	\$		\$		\$		\$	
Street Cut	\$		\$		\$		\$	
Subtotals	\$		\$		\$		\$	
Total Amount Due: \$ Backflow Preventer Required: □ Yes □ No								
Quoted by:	Date Quoted:							

Date Quoted: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Public Works Department

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