

HANOVER TOWNSHIP SEWER AUTHORITY

SEWER TAP APPLICATION

Date: _____

Customer No. _____

Applicant Information

Applicant Name: _____

Mailing Address: _____

Applicant Phone: _____

Property Address: _____

Tax Map Number: _____

Type of Use: Residential Commercial Industrial

Service For: New Construction Existing Building Expansion of Existing Building

Line Size: Mainline Extension Service Lateral Only

Contractor Information

(or Customer if self-installing)

Contractor Name: _____

Mailing Address: _____

Contractor Phone: _____

I hereby certify that the above information is true and correct and hereby agree to:

- Install the requested tap connection
- Comply with the current Rules and Regulations of the Hanover Township Sewer Authority

Applicant's Signature

Authority Use Only

Number of EDUs: _____

Tap Fee @ \$ _____ per EDU: \$ _____

Application Fee = \$ _____

Optional Remote Alarm Fee = \$ _____

Total Fees Due= \$ _____

Amount Paid=\$ _____

Balance Due=\$ _____

Payment Method (circle one)

Cash / Check

Approved: _____

Authority Representative

Date Issued: _____