

VILLAGE OF CORINTH UTILITY MODIFICATION APPLICATION

Property Information

Property Address: _____
Owner Name: _____
Owner Address: _____
Owner Telephone: _____

Describe use of property where service is requested: (e.g. Single family, 3-family, 2-retail and 1-apartment, etc.)

Applicant Information (If Not Same As Above)

Name: _____
Address: _____
Telephone: _____

Type Of Modification Request (Check All That Apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Application for Water Service | <input type="checkbox"/> Deduct Meter | <input type="checkbox"/> Turn Water On |
| <input type="checkbox"/> Application For Sewer Service | <input type="checkbox"/> Commercial Meter | <input type="checkbox"/> Turn Water Off |
| <input type="checkbox"/> Out of District Account Transfer | <input type="checkbox"/> Cast Iron Cover | <input type="checkbox"/> Drain Meter (Frost Protection) |
| <input type="checkbox"/> Water for Temporary Purposes | <input type="checkbox"/> Individual Sewer meter | <input type="checkbox"/> Other _____ |

Project Description: _____

Water connection size: _____ (diameter) Water Pipe Material Type _____
Sewer connection size: _____ (diameter) Sewer Pipe Material Type _____

* A detailed map shall accompany all applications for new water and/or sewer service connections

Owner's Certification (To Be Completed By The Landowner)

I certify that I am the property owner of the subject property and I am requesting a permit for and authorize completion of the work as indicated on this form. I understand that initial payments made with this application are based on cost for standard services and understand that non-standard conditions may exist which could increase costs. If non-standard conditions will increase costs beyond the remitted payment amount, I understand that work cannot commence until additional funds are delivered to the Village.

Date	Name (please print)	Signature
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VILLAGE CLERK USE ONLY

Date Complete Application Received: _____
Estimated Fee Per Standard Schedule: _____
Payment Received By: _____ Date: _____
Sent to DPW By: _____ Date: _____
Input On System By: _____ Date: _____
Clerk Notes: _____

VILLAGE DPW USE ONLY

Date Application Approved By DPW: _____ Date Service To Be Changed: _____
Person Making Change: _____ Title: _____
DPW Notes: _____
DPW Signature: _____ Date & Time: _____ AM/PM
Sent to Village Clerk By: _____ Date: _____

TOWN CLERK USE ONLY (IF APPLICABLE)

Date Application Received: _____ Estimated Fee (1.4x Village Standard Schedule): _____
Input On System And Sent To Village By: _____ Date: _____
Town Clerk Notes: _____