UTILITY TAP REQUEST FORM - OUTSIDE CITY LIMITS

PROPERTY OWNER: _________________________________________

PROPERTY ADDRESS: _______________________________________

MAILING ADDRESS: _______________________________________

PHONE NUMBER: _________________________________________

LOT: _______ BLOCK: _______ SUBDIVISION: _______________________________

PLUMBER: ______________________________________________________________

PHONE NUMBER: __________________________

( ) SINGLE FAMILY    ( ) MULTI-UNIT       ( ) BUSINESS             ( ) OTHER
( ) ¾-INCH                     ( ) 1-INCH                   ( ) 1½-INCH                ( ) 2-INCH
( ) WATER & SEWER          ( ) WATER ONLY          ( ) SEWER ONLY

READ THE FOLLOWING AND SIGN AFTER “APPLICANT”

1. The following forms are to accompany this tap request form:
   A. Copy of the approved septic system permit, if applicable
   B. A plat or survey of the property to be served showing:
      a. easements, sidewalks, curbs, driveway lines, building location, etc.
      b. desired locations for water/sewer/meter
      c. complete building plans for anything other than single family dwellings
      d. a copy of permits, (e.g. moving permit) if applicable

2. Owner, user, applicant agrees to comply with all applicable provisions of the Utility and Zoning Codes of the Town of Silver City.

3. Owner, user, applicant, is responsible for exposing the water main at the tap location. The size of the exposure must be 3 feet by 3 feet in plan view to a depth of 6-inches below the bottom of the water main.

4. Prior to covering any portion of the work, the Town Utilities Department must be notified when the private service lines are ready for inspection and connection to Town utilities.

5. Due to water pressure variations, north of Pine and 25th Street, all customers are advised to install a pressure reducing valve (PRV) on their service line.

6. Per City Ordinance No. 1135, new dwellings are required to install a one-way check valve on all new sewer service connections. They can be purchased at any plumbing/hardware store.

7. Per City Ordinance No. 1004, water and sewer taps may not be purchased more than 6 months prior to actual connection to the systems.
The applicant, by his signature, states that the property where the water is to be used has not been part of an illegal land division or subdivision for the period beginning June 15, 1992 to present in the City and June 15, 1995 to present in the County.

| APPLICANT: _________________________________ DATE: ________________________________ |
| WATER/SEWER FEES: |
| WATER ACQUISITION: ____________ METER/CAN: _______________ |
| WATER TAP: _______________ SUB-TOTAL: _______________ |
| SEWER TAP: _______________ DEPOSIT: _______________ |
| SEWER DEVELOPMENT: _______________ |
| TOTAL FEES DUE: _______________ |
| Calculated By: _________________________ Date: _________________________ |
| Utilities Approval: _____________________ Date: _________________________ |
| Planning Approval: _____________________ Date: _________________________ |
| Addressing Approval: _____________________ Date: _________________________ |

Fees given are those in effect on the date of approval and are subject to change by town action at any time prior to payment being received.

| AMOUNT PAID: _______________ DATE: _________________________ |
| RECEIPT #: _______________ COLLECTED BY: _________________ |
TOWN OF SILVER CITY
APPLICATION FOR UTILITY SERVICES
PO BOX 1188    SILVER CITY, NM 88062
505-538-3731    538-5123 (FAX)

PLEASE PRINT

Deposit____________________________

ACCT. NUMBER__________________________ TURN ON DATE_____________________________

NAME________________________________ DATE_____________________________

SERVICE ADDRESS________________________________________________________________

MAILING ADDRESS________________________________________________________________

ARE YOU RENTING?  Y OR   N  IF YES, FROM WHOM?____________________________

EMPLOYER___________________ EMPLOYER PHONE#________________________________

HOME PHONE#________________ SSN_______________ DL#____________________________

DOB____________________ SPOUSE NAME_________________________________________

NAME & ADDRESS OF NEAREST RELATIVE___________________________________________

PLEASE READ IMPORTANT INFO ON HANDLING OF DEPOSIT BEFORE SIGNING !!!

ORDINANCE NO. 1049

SECTION 30-41(A) THE WATER SERVICE DEPOSIT SHALL BE REFUNDED TO THE PROPERTY OWNER ONE YEAR AFTER FIRST BILLING UPON COMMENCEMENT OF WATER SERVICE IF THE PROPERTY OWNER HAS A SATISFACTORY CREDIT RATING AS DEFINED IN THE TOWN’S UTILITY DEPOSIT POLICY. THE WATER SERVICE DEPOSIT SHALL BE REFUNDED TO THE CUSTOMER, IF IDENTIFIED AS OTHER THAN THE PROPERTY OWNER (RENTEE, LESSEE, ETC.), ONLY UPON FINAL TERMINATION OF SERVICE WITH THE TOWN AND IN ACCORDANCE WITH THE TOWN’S UTILITY DEPOSIT POLICY, AND IN ACCORDANCE WITH THE PROVISION OF SECTION 30-42.

COPIES OF ORDINANCE ARE AVAILABLE UPON REQUEST FOR VIEWING ONLY.

IF YOUR BILL DUE DATE LANDS ON A WEEKEND OR A HOLIDAY, PLEASE MAKE SURE TO PAY BEFORE THIS DATE.

NOTE: Payments received after 2:30 pm ARE CREDITED to the next business day.

SIGNATURE_______________________________________________