Cornwall Borough

Application for Water Service

I, _____ the undersigned, do hereby make Application for Water Service.

Type of Building: ____ Residential ____ Commercial ____ Industrial

____ Apartments (___ Units) ____ Restaurant ____ Other _____

SERVICE ADDRESS: _____

_____

_____ Township/Borough

BILLING NAME &
ADDRESS (IF DIFFERENT): _____

_____

Development (If applicable): _____

Company (If applicable): _____

Applicant's Phone Number: _____

_____ _____

Signature of Applicant Date Cornwall Borough Approved Date

WATER DEPARTMENT USE ONLY:

Meter Size: _____ **Service Line Size:** _____

Capacity Fee: _____ **Connection Fee:** _____

Facilities Fee: _____ **Distribution Fee:** _____

Private Fire Service Fees (If applicable)

Fire Line Size: _____ **Fire Capacity Fee:** _____ **# of Hydrants** _____

Total Fees: _____ **Cash / Check #** _____

Received by: _____

Cornwall Borough **Date**