

# Stratford Utility Corporation - Application for Water and/or Sewer Service

234 Shakespeare Drive, Stratford, P.E.I. C1B 2V8 (902) 569-4662

**This application must be filled out completely and signed by the customer, developer or the installer before service will be provided. The customer/developer/installer agrees to abide by the requirements of the Stratford Utility Corporation (as attached) and all applicable provincial legislation.**

Application is hereby made for connection to the Stratford Utility for:

Both Sewer and Water Service     Sewer Service     Water Service     Sprinkler System

**Service will not be provided until the application fee is paid, a provincial plumbing certificate is issued (where one is required) and an inspection of the work is carried out by the Utility before the work is covered up.**

## **IT IS ILLEGAL TO CONNECT SUMP PUMPS TO MUNICIPAL SEWER**

### Customer Information

Customer Name: \_\_\_\_\_ Service Address: \_\_\_\_\_

Lot # : \_\_\_\_\_ Property Tax Number: \_\_\_\_\_ Parent # : Yes  No

Mailing Address : \_\_\_\_\_ Postal Code: \_\_\_\_\_ Telephone No: \_\_\_\_\_

### Installer Information

Installer Name: \_\_\_\_\_ Telephone No: \_\_\_\_\_

**Service Information**    *Underfooting service is not guaranteed by the Utility. Please verify elevations before construction begins.*

Type of Service:     Single family     Duplex     Multiple Family - # of units \_\_\_\_\_

Commercial     Other - Please Describe \_\_\_\_\_

Water Service:     3/4" (19 mm)     other \_\_\_\_\_    Sprinklered:    Yes  No

Sewer Service:     4" (100 mm)     other \_\_\_\_\_

Meter Size (for commercial): \_\_\_\_\_ Frontage (feet): \_\_\_\_\_    *Off Survey Plan*  *Off Deed*

Plumbing Permit Number (where required): \_\_\_\_\_

Existing Services:    Septic System: Yes  No     Well: Yes  No

**Fees are calculated by the number of water or sewer lines installed per dwelling. Customers installing sprinkler systems are asked to contact the Utility before installation of their water line.**

Applicable Fees:     Water Inspection (\$20.00)     Water Turn On (\$10.00)  
 Sewer Inspection (\$20.00)     Sprinkler Capital Contribution ( per square foot)

**Note:** Customers and installers are advised that water and sewer inspections and water turn ons are carried out during normal working hours (Monday to Friday, 8:00 am - 4:30 pm) and only with 24 hour prior notice to the Utility. Inspections or water turn ons required after hours, require special arrangements and are subject to additional charges.(see below)

### Additional Charges for After Hour Inspections

After Hours Water / Sewer Lateral Inspections: Additional \$30.00 (Billed to customer account)

After Hours Water Turn On / Off:                      Additional \$15.00 (Billed to customer account)

\_\_\_\_\_ **or** \_\_\_\_\_  
Customer /Developer Signature    Installer Signature    Date

<b>For Utility Use Only</b>	Development Permit # _____	Utility Application # _____
Fees: Amount Received _____	Date: _____	Receipt No. _____
Application Received By: _____ Application Approved By: _____		
Sewer Customer: <input type="checkbox"/> New Customer <input type="checkbox"/> Existing Customer - Account No.: _____		
Sewer Rate Code: _____	Bill Start Date: _____	Set up By: _____
Water Customer: <input type="checkbox"/> New Customer <input type="checkbox"/> Existing Customer - Account No.: _____		
Water Rate Code: _____	Bill Start Date: _____	Set up By: _____
Billable Frontage (feet ): _____	PID #: _____	Parent # :Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments: _____		
_____		
_____		

## Sewer Connection

**For Utility Use Only**

Sewer Inspection Date: \_\_\_\_\_ Inspected By: \_\_\_\_\_

Inspection:  Passed  Failed Septic tank Decommissioned:  Yes  No  N/A

**Backwater Valve Installed:**  Yes  No  N/A Final Approval Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Water Connection

**For Utility Use Only**

Water Inspection Date: \_\_\_\_\_ Inspected By: \_\_\_\_\_

Inspection:  Passed  Failed Well Decommissioning:  Yes  No  N/A

**Idler Installed:**  Yes  No  N/A **Check Valve Installed:**  Yes  No  N/A

**Pressure Regulating Valve Installed:**  Yes  No  N/A Final Approval Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Water Turn On Date: \_\_\_\_\_ Turned On By: \_\_\_\_\_