



# City of Barre, Vermont

" GRANITE CENTER OF THE WORLD "

## APPLICATION FOR WATER CONNECTION PERMIT

I, \_\_\_\_\_  
(Owner)

of \_\_\_\_\_  
(Owner's Address)

hereby make application to connect building number \_\_\_\_\_  
(Or Lot Number)

located on \_\_\_\_\_  
(Street)

for the purpose of \_\_\_\_\_  
(Use: Residential, Commercial, or Industrial)

to the City's water service and agree to abide by the Rules and Regulations of the Water Department and water rates, as established by the Barre City Council.

Work to be completed by \_\_\_\_\_ (Two-day notice required).  
(Date)

NO PERSON UNLESS AUTHORIZED BY THE WATER DEPARTMENT SHALL TURN ON THE WATER TO A HOUSE OR PREMISES OR SHUT IT OFF THEREFROM; NOR UNLESS TURNED ON BY ONE SO AUTHORIZED, SHALL A PERSON DRAW OR USE WATER FROM THE CITY WATERWORKS.

In making a new service connection the City will tap the main and extend the service line back to the curb line where a curb-stop, box and rod will be installed. These costs will be borne by the property owner and billed to the same after completion of the work. All work done on the water system or meters outside the City limits, other than water mains owned by the City of Barre, are subject to all costs that the City incurs as a result of such work, and will be billed to the property owner. Meters for Town accounts will be supplied by the City and billed to the property owner upon installation.

**System Development Charge (SDC): \$2,000.00 per service connection.**

**WATER SERVICE WILL NOT BE ACTIVATED UNTIL ALL FEES ARE PAID IN FULL.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Owner)

Printed Name: \_\_\_\_\_ Tel. Number: \_\_\_\_\_  
(Print Legibly) (Daytime)

(SECTION BELOW TO BE COMPLETED BY ENGINEERING DEPARTMENT PERSONNEL ONLY)

### Application Approved and Permit Granted:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Authorized Signature)

(SECTION BELOW TO BE COMPLETED BY WATER DEPARTMENT OFFICE PERSONELL ONLY)

#### Fee Payment Schedule:

\$2,000.00 S.D.C.  
Payment Type: \_\_\_\_\_  
Date: \_\_\_\_\_  
Administrator: \_\_\_\_\_

Service installation fee  
Payment Type: \_\_\_\_\_  
Date: \_\_\_\_\_  
Administrator: \_\_\_\_\_