



Phone: 817-489-2201
 Website: www.newarktexas.com

Address: 209 Hudson St.
 PO Box 156
 Newark, TX 76071

Water and Sewer Tap Application

Building Permit Number: _____

Applicants Name: _____ Date: _____
 Contact Number: _____ Email: _____
 Home Owners Name (if different) _____ Project Address: _____
 Billing Address: _____ Zoning: _____
 Tap Location Address: _____

New Construction Existing Structure w/ New Taps Required Existing Structure w/out Previous Service

Type of Tap (check all that apply)	Tap Size (Please circle)	Remarks (Qty., Type, Notes, Etc.)
<input type="checkbox"/> Residential <input type="checkbox"/> Irrigation <input type="checkbox"/> Commercial <input type="checkbox"/> Fire <input type="checkbox"/> Other	Water: 3/4" 1" 2" Other: Sewer: 4" 6" Other:	

Please read the following notes before signing this application:

- An account must be activated with Utility Billing.
- A plumbing, irrigation and/or fire suppression permit must be obtained for connection to tap.
- For new development, the project engineer shall be responsible for obtaining any required TXDOT permits as well as ensuring the required line size for the structure.
- The city shall charge the customer a reasonable fee for providing service from the city's system to the customer's property line.
- Placement and location of the tap lines shall be at the discretion of the city.
- The tap fee shall be paid by the customer prior to commencement of service.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Signature of Applicant: _____ Date: _____

Office Use Only

Water Tap Fee: _____ Sewer Tap Fee: _____ Other Fees: _____ Total Fees: _____

Amount Collected: \$ _____	Date: _____	By: _____
Receipt: # _____	Date: _____	By: _____
Comments:		

Approved: _____	Date: _____
PW Director Approved: _____	Date: _____