

APPLICATION NO. _____

WATER APPLICATION

TOWN OF MANCHESTER

APPLICANT _____ DATE _____

ADDRESS _____ NO. _____

AGENT _____ PHONE _____

To accept and abide by all provisions of the Water Ordinances for the Town of Manchester, Ontario County, New York and other pertinent ordinances or regulations that may be adopted in the future.

Application must be made and signed by the Owner of the property or his agent, and full payment must be made to the Town of Manchester before work can begin.

Note: Applications may be suspended from November 1st to April 1st due to adverse weather or frost conditions at the discretion of the Water Superintendent.

Please notify the Water Department when construction begins.

Fee Schedule Adopted _____

\$1,600.00 – 1" service and 1" meter, check valve, pressure regulator and angle meter valve

\$2,200.00 – 2" service and 2" meter, check valve, pressure regulator and angle meter valve

\$1,750.00 – Out of District – See Rules and Regulations

----- Greater than 1" service (at cost)

Signature _____ Dated _____

Print Name _____

Application & Contract
for
Water Service Connection
for the
Town of Manchester Water System

Applicant: _____

Address of Connection _____

Phone Number: _____

In consideration of acceptance of this Application, the undersigned, his agent, successors and assigns agree:

To accept and abide by all provisions of the "Rules and Regulations for the Management and Protection of the Town of Manchester Public Water System" and all other pertinent ordinances or regulations that may be adopted in the future.

To maintain the water service from the building to the lot line or easement at no expense to the Town.

All material and work from the water main to the property line or edge of easement will be furnished and installed by the Town of Manchester within the public highway or easement and a water meter (if applicable) will be installed on the premises.

Application must be made and signed by the Owner of the property or his agent and full payment must be made to the Manchester Water District.

Signature: _____ Date: _____

Print Name: _____

Water Service Fee: _____ Account No: _____

Paid Date: _____

Received by: _____

“The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.”

Ethnicity: Hispanic or Latino _____
Not Hispanic or Latino _____

Race: (Mark one or more)
White _____
Black or Native American _____
American Indian/Alaskan Native _____
Asian _____
Native Hawaiian or other Pacific Islander _____

Gender: Male _____ Female _____

Please provide the above information for all persons in the household.