

City of Lava Hot Springs
P.O. Box 187, 115 West Elm Street
Lava Hot Springs, ID 83246

APPLICATION FOR NEW SEWER SERVICE

Applicant(s) Name: _____ Phone: _____

Social Security Number: _____

Street Address: _____

Legal Description: Lot(s) _____ Block _____

Subdivision _____

Mailing Address: _____

City, State, Zip code: _____

Email Address: _____

Type: Domestic _____ Commercial _____ Industrial _____

Service Connection Size: 4" _____ 8" _____

Date new connection is required: _____

Do you own the property? Yes or no.

If yes attach a copy of the deed.

If no a deposit is required.

I hereby certify that I am the owner-purchaser of the above described property and that I do hereby accept and will comply with all rules, ordinances, regulations and policies which may be prescribed by the City relating to sewer service and distribution and other City services and that I will be responsible for payment of this account.

Date: _____ Applicant Signature: _____

..... *Office Use Only*

Account No. _____

New service inspected by: _____ Date: _____

Connection fee: _____