

EAST BERLIN AREA JOINT AUTHORITY

PO BOX 37; EAST BERLIN, PA 17316

Water Connection Permit

Permit Number: _____

Municipality: _____

Name: _____

Address: _____

Phone: _____

Dwelling Use:

Billing Units:

Residential

() Single

() Multi

Non-Residential

() Commercial

() Industrial

() Other

Fees:

Date Paid

Amount

Tapping Fee

\$ _____

Inspection Fee

\$ _____

Miscellaneous

Grease Trap/Oil Interceptor Info

Location: _____ Tank Size: _____

Description: _____ Installer: _____

Water Meter Received

___ Yes

___ No

Serial Number: _____

The Issuance of this permit is subject to the following conditions: 1. All construction, operations, procedures, discharge, and usage shall be subject to the Authority regulations and Municipal Ordinances. 2. No part of this installation shall be covered until inspection and approval is done by the Authority's representative. 3. Issuance of this Permit shall not relieve the Applicant of any responsibility under any other Municipal, State, or Federal Law requirement.

Applicant: _____

Date: _____

Issued by: _____

Date: _____

Inspected by: _____

Date: _____