City of Rensselaer, Indiana **Water Tap Application**

Street and Sanitation Department METER DEPOSIT 820 East Walnut Street Date: PAID \$_ Rensselaer, Indiana 47978 CLERKS INITIALS Phone 219-866-7833 Fee: Fax 219-866-2728 Please Print in Black Ink Only Business/Residence/Project Name: Project Address: Description of Project: Contractor **Billing Address** Name: Name: Address Address: 7IP 7IP City: Phone(s) Phone(s) **Building Owner** Name Address ZIP Phone(s) **Type of Occupancy** Type of Connection Water Assessment Domestic Meter, Size Requested:_____ Residential Houston Subdivison Backflow Preventor Size: ☐ Mult. Family Fireline, Size _____ Commercial ☐ Fire Hydrant School Industrial Sprinkler Size ____ Other (list) Inspector's Signature X_____ Remarks: Application is hereby made for authority to connect the premises at _ Street (Avenue), with the City's water system on _____ _Street (Avenue), by a __ inch pipe. Connection will be made _____ feet North, South, East or West of the fire hydrant located at the intersection of _____ and __ All material and workmanship will be in the strict compliance with City Ordinances relative to such work and shall be approved by the Water Superintendent before and after backfilling

Water Superintendent's Signature X _____

Subdivison