

SOUTH SANGAMON WATER COMMISSION
Post Office Box 83, New Berlin IL 62670-0083
www.sswc.us

business office: 217-381-5359
water plant: 217-685-6210

NEW RESIDENTIAL WATER TAP APPLICATION

The undersigned hereby makes application for water service from the South Sangamon Water Commission in accordance with the terms and rates of the Commission, and agrees to pay the monthly minimum amount as soon as water is available at the meter.

New Service Tap Fees: The tap fee for a new residential service tap shall be equal to the Cost Estimate for such new service tap as prepared by or generated by the South Sangamon Water Commission or its duly authorized representative plus an additional charge of Five Hundred Dollars (\$500.00). The customer must pay said fee plus the additional charge prior to the commencement of the new service tap installation. The tap fee does not include the cost of boring under a public road which additional costs and charges shall be directly billed to, contracted for and paid by the customer to the boring supplier. The Commission, or persons or entities under contract with the Commission, shall make all taps and shall install all meters and equipment upstream of the meters. (Ordinance 21-02)

Once the water service is installed and the grade is changed or damage occurs to the water service or the water line, a charge for labor and material to adjust the service or repair the damage may be charged.

The Commission is installing dual check valves on all new water services as a means to protect the public water system from anything that could backflow into our mains from your plumbing. As water is heated in your water heater, it expands. You must provide for the thermal expansion. You may need to consult a licensed plumber regarding this and any other questions prior to requesting installation.

Full Payment must accompany this application before a water service can be installed.

I HEREBY REQUEST A 1" WATER SERVICE BE INSTALLED AT:

Service Address _____
Street City Zip Code

Mailing Address _____
Street City/State Zip Code

Phone: Home _____ Work _____

Print Name _____ Signature _____

For Water Commission Office Use:

Date Payment Received: _____

Date Meter Service Completed: _____

Meter Reading & Serial Number: _____