



CITY OF TERRACE

APPLICATION FOR SERVICE / CONNECTION

For SERVICE(s) at :		ORIGINAL → P.W. Dept'l Services Clerk	
		COPY: Building Inspector <input type="checkbox"/> Roads <input type="checkbox"/> Engineering Services <input type="checkbox"/>	
		COPY + INFO SHEET → Applicant <input type="checkbox"/>	
LEGAL Description		#	
Lot _____ Block _____ Plan _____ D.L. _____ Folio: _____			
WATER - Size mm	SEWER – Size mm	STORM – Size mm	
NEW Connection <input type="checkbox"/> or Reconnection <input type="checkbox"/>	Domestic <input type="checkbox"/> Industrial <input type="checkbox"/>	Commercial <input type="checkbox"/>	Water Meter May be Required
OWNER:		Mailing Address:	
Phone Nos.: Home:		Work: Cell:	
Email address:			
Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act, and will be used only for the purpose for which it was collected. If you have any questions about the collection and use of this information, contact the City's Freedom of Information Co-ordinator at (250) 638-4721.			
NOTE: Only a qualified Contractor or the homeowner can do the actual service work and MUST arrange for <u>inspection of all Service Connections</u> (water, sanitary sewer, and storm service) by a City Inspector (Phone 615-4000).			
Temporary Water Supply During Construction <input type="checkbox"/>		PERMANENT ON <input type="checkbox"/>	
Regular water & sewer charges shall automatically apply at the end of the 90-day construction period, or prior if an Occupancy Permit has been issued. If you do not wish to be on regular utility charges, you must apply for a water-off.			

I, _____ (owner ☐ or authorized agent ☐) hereby make application for the above connection(s) and I agree to be bound by all the provisions of the bylaws now in force and to any amendments to the said bylaws which may be hereinafter enacted by the Council for the City of Terrace, and I further agree to pay all rates and rents due for servicing the above mentioned location.

Date: _____ Applicant's Signature: _____

If you wish to have a person act as your agent with respect to this application, please provide the name and address. I hereby authorize

_____ of _____
to act on my behalf for this application.

Owner's Signature: _____

For SERVICE(s) at :					Folio		
WATER - Size mm		SEWER – Size mm		STORM – Size mm			
WATER METER REQUIRED: No <input type="checkbox"/> Yes <input type="checkbox"/> Size:							
Connected by (if known):					Date:		
INSPECTIONS:	SIZE Inspected	Date	Ref #	Inspected By			
WATER line	mm						
SEWER line	mm						
STORM line	mm						
LATERALS Pre-Installed? No <input type="checkbox"/> → Yes <input type="checkbox"/> By: _____ Date: _____		Codes entered by: → ↓	Water 6260 9 ____ ____	Sewer 4260 9 ____ ____	Storm 2234 9 ____ ____		
Copy to Roads Foreman for Installation(s) <input type="checkbox"/>		Date(s) lateral(s) installed:					
		ACTUAL Costs:					
Laterals Pre-paid? No <input type="checkbox"/> Yes <input type="checkbox"/>		Details:					
Late Comer Charge? No <input type="checkbox"/> Yes <input type="checkbox"/>		Bylaw #:		details			
LATERAL CHARGES (as per Bylaw). WATER COST Plus Admin Chages → \$ 6120-688 SEWER COST Plus Admin Chages → \$ 4120-688 STORM COST Plus Admin Chages → \$ 2114-557		ACTUAL \$ \$ \$	Documentation & Inspection Charges (as per Bylaw). Water <input type="checkbox"/> \$100.00 6120-690 Sewer <input type="checkbox"/> \$100.00 4120-690 Storm <input type="checkbox"/> \$100.00 2114-556		OTHER CHARGES: Water "ON" <input type="checkbox"/> \$30.00 Temp Supply <input type="checkbox"/> \$40.00 6120-691 DATE of "ON": _____ 90 Days Expires: _____ Works within R.O.W <input type="checkbox"/> \$1,000.00 2414-153 Re-Inspections \$ _____ Late Comers \$ _____		
COST: \$		Payment details:		Billing details:			
				Billing request attached <input type="checkbox"/>			
Date Info Circulated → _____, 20__	Finance <input type="checkbox"/>	Mapping <input type="checkbox"/>	PW File <input type="checkbox"/>	Other			
Other Information:							