



**Application for Sanitary Sewer Service**

Date of Application \_\_\_\_\_

Applicant or Business Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Service Address:** \_\_\_\_\_

Subdivision: \_\_\_\_\_

**Information below is to be completed by the Montgomery County Regional Sewer District**

Service Type: RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_

Equivalent Dwelling Units (By District Engineer) \_\_\_\_\_

District EDU Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Charges & Fees:**

Number of EDUs X \$1,500.00 Capacity Fee = \$ \_\_\_\_\_

Sewer Service Application & Inspection Fee = \$ \_\_\_\_\_

Total Payable = \$ \_\_\_\_\_

**District Approval:**

I, \_\_\_\_\_, as a representative of the Montgomery County Regional Sewer District, do hereby certify to the respective Plan Commission that the above applicant has applied for and paid all applicable fees and is approved for service from the Montgomery County Regional Sewer District on this date: \_\_\_\_\_

All checks should be made payable to: Montgomery County Regional Sewer District

❖ **Important:** See "Sewer Connection Guidelines" as adopted by the Montgomery County Regional Sewer District.