



# 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 + <b>INFO SHEET</b> → Applicant <input type="checkbox"/>

<b>LEGAL Description</b>	
Lot _____ Block _____ Plan _____ D.L. _____ Folio: _____	# _____

WATER - Size _____ mm	SEWER – Size _____ mm	STORM – Size _____ mm
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NEW Connection <input type="checkbox"/> or Reconnection <input type="checkbox"/>	Domestic <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/>	Water Meter May be Required
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OWNER:	Mailing Address:
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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 inspection of all Service Connections (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"/>
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**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: \_\_\_\_\_

<b>For SERVICE(s) at :</b>					<b>Folio</b>	
<b>WATER - Size</b> <b>mm</b>		<b>SEWER – Size</b> <b>mm</b>		<b>STORM – Size</b> <b>mm</b>		
WATER METER REQUIRED:    No <input type="checkbox"/> Yes <input type="checkbox"/> Size:						
Connected by (if known):					Date:	
<b>INSPECTIONS:</b>	<i>SIZE Inspected</i>	<i>Date</i>	<i>Ref #</i>	<i>Inspected By</i>		
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: → ↓		<b>Water</b> 6260 9 _ _	<b>Sewer</b> 4260 9 _ _	<b>Storm</b> 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		
<b>LATERAL CHARGES (as per Bylaw).</b>		<b>ACTUAL</b>		<b>Documentation &amp; Inspection Charges (as per Bylaw).</b>		<b>OTHER CHARGES:</b>
<b>WATER</b> COST Plus Admin Chages → 6120-688	\$		<b>Water</b> <input type="checkbox"/> \$100.00 6120-690		Water "ON" <input type="checkbox"/> \$30.00	
<b>SEWER</b> COST Plus Admin Chages → 4120-688	\$		<b>Sewer</b> <input type="checkbox"/> \$100.00 4120-690		Temp Supply <input type="checkbox"/> \$40.00 6120-691	
<b>STORM</b> COST Plus Admin Chages → 2114-557	\$		<b>Storm</b> <input type="checkbox"/> \$100.00 2114-556		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:						