

Water/Wastewater Department
 Municipal Building
 P.O. Box 579
 203 N Alexander St
 Toccoa, GA 30577
 (706) 886-8451



City of Toccoa

WATER/SEWER TAP APPLICATION

INSTRUCTIONS – PLEASE READ! INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. Complete Application and mail or bring to City Hall. When fees have been paid, tap will be scheduled and you will be contacted with other details. Mail or bring payment to Customer Service at City Hall. We will respond to denied applications. It is a violation of City ordinance to tamper with a meter; this includes turning it on or off.

PROPERTY OWNER’S NAME _____

MAILING ADDRESS _____			STREET ADDRESS FOR TAP _____		
CITY _____	STATE _____	ZIP _____	CITY _____	STATE _____	ZIP _____
HOME PHONE _____			WORK PHONE _____		

CURRENT RESIDENT IF OTHER THAN OWNER _____

Legal Description of Property: _____ Tax Map No. _____ Parcel No. _____ OR
 Deed Book No. _____ Page No. _____ in _____ County
 OR Attached Copy of Deed or Plat to Application

Service(s) Requested (Check all applicable)

WATER **SEWER**

*Sewer service is only available to Water Customers

This application is made subject to the following terms and conditions, to-wit:

The Undersigned, his successors and assigns, agrees:

1. to pay to the City of Toccoa in accordance with the published schedule of fees for the installation of the tap and service, and to furnish without charge an easement for the right-of-way for any pipeline and appurtenances necessary for such installation, and for maintenance and repair thereof.
2. to comply with all rules, regulations and policies of the City of Toccoa Water/Wastewater Department and to pay the monthly Utility bills as provided by the City in accordance with its regulations.
3. that the Utility service is limited to the use of only (1) one family dwelling house or commercial building.
4. to save and hold free of all damages the City resulting from the installation of the tap or the use thereof by the undersigned.
5. that in connection with the services to be performed, the City of Toccoa shall not be liable for damages to the dwelling or to any property of the applicant by reason of any action on the part of the authorities of the City of Toccoa, Stephens County, or of the State of Georgia, or their duly authorized officers, agents, or employees.
6. that the City of Toccoa shall determine when and where tap and service is to be located.
7. to pay monthly bill of Utility from the time water or sewer tap installation in completed. If there is no usage, undersigned agrees to pay minimum bill, OR pay a one-time fee of \$50.00 to have service discontinued.
8. **to post Street number or Box number in a permanent, prominent location, such as on a mail box or posted on a section of angle iron.**
9. to install cut-off valve immediately beyond water meter and to install backflow preventer in sewer service line.

ACCEPTED AND AGREED TO BY: _____ DATE: _____

Signature of Property Owner

SERVICE	OFFICE USE ONLY			TAP FEE	METER DEP.	TOTAL
	APPROVED (DATE)	DENIED (DATE)	REVIEWED BY			
WATER	_____	_____	_____	_____	_____	_____
SEWER	_____	_____	_____	_____	_____	_____

FINAL APPROVAL: _____ TOTAL AMOUNT DUE: _____
UTILITIES DIRECTOR (or Designee)

“The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of the individual applicants on the basis of visual observation or surname”.

Ethnicity: Hispanic or Latino _____
Not Hispanic or Latino _____

Race: *(Mark one or more)*

White _____
Black or African American _____
American Indian/Alaskan Native _____
Asian _____
Native Hawaiian or Other Pacific Islander _____

Gender: Male _____ Female _____

“This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with USDA, Director, Office of Civil Rights, Room 326-W, Whitten Bldg., 1400 Independence Ave, SW, Washington, DC 20250-9410”.