

The

CHARTER TOWNSHIP of PORT HURON ST CLAIR COUNTY'S FIRST

3800 Lapeer Road, Port Huron, Michigan 48060

PHONE: (810) 987-6600

FAX: (810) 987-6712

NEW OWNER APPLICATION FOR UTILITY SERVICE

Date: _____

Mail Billing To:

Address: _____

Name: _____

Computer #: _____

Address: _____

Lot #: _____

City: _____

Subdivision: _____

Telephone #: _____

TYPE OF STRUCTURE: ONE FAMILY RESIDENTIAL
 MULTIPLE FAMILY - # OF APARTMENTS _____
 OTHER

IF A TENANT IS TO BE BILLED, A TENANT LIABILITY NOTICE FORM MUST BE SUMITTED WITH THE REQUIRED DEPOSIT.

I hereby represent that I am the owner of the property described above and as such do hereby apply for utility service to said property. In consideration thereof, I agree to abide by the rules and regulations for the Charter Township of Port Huron including all charges and rates as may now exist and may, from time to time, be amended. I agree to maintain the building sanitary sewer at no expense to the Township.

I also acknowledge that, in accordance with the laws for the State of Michigan and provisions of the Ordinance of the Charter Township of Port Huron, all delinquent charges shall become a Lien against the property served. Quarterly utility charges will be charged from the date of inspection.

Floor drains, sump pumps, surface and storm water, and eve troughs ARE NOT ALLOWED to be connected to the sanitary sewer system.

Owner's Signature: _____

Owner's Address: _____

Owner's Telephone: _____

CHANGE MADE ON
TOWNSHIP RECORDS

____/____/____

BY _____