

SOMERSET COUNTY SANITARY DISTRICT, INC.

11916 SOMERSET AVE. ROOM 216

P.O. BOX 326

PRINCESS ANNE, MARYLAND 21853

PHONE (410-651-3831)

FAX (410-651-5420)

Account # _____ Map _____ Parcel _____ Block _____ Lot _____

APPLICATION FOR WATER AND/OR SEWER CONNECTION

This will authorize you to install a connection from the water main to the property line of my property on the _____ side of _____ at a cost to me of _____ Minimum for a line of 3/4 " diameter or smaller. **(Where the cost of installation is higher, the property owner will be responsible for the actual cost to the district.)**

Applicant agrees to claim no damage on account of stoppage of the flow of water resulting from accident, or when necessary to make alteration, repairs or improvements.

This will authorize you to install a install a "Y" branch and connecting sewer from the main sewer to the property line of my property on the _____ side of _____ at a cost to me of _____ minimum, for a line six inches in diameter or smaller. **(Where the cost of installation is higher, the property owner will be responsible for the actual cost to the district.)**

Applicant shall keep all plumbing fixtures and sewer line on applicant's premises in good repair. Applicant agrees to accept and abide by the Rules and Regulations of the Somerset County Sanitary District, Inc. as the same may be amended from time to time, which Rules and Regulations are hereby incorporated herein by reference. The name and address of the person or firm doing the work is _____ . Applicant will notify the District office when the water/sewer lines are ready for inspection and connection, but before any portion of the work is covered.

I acknowledge all above information in particular **WHERE THE COST OF INSTALLATION IS HIGHER, THE PROPERTY OWNER WILL BE RESPONSIBLE FOR ACTUAL COST TO THE SANITARY DISTRICT.**

(Signature of the Applicant)

(Telephone Number of the Applicant)

APPROVED: _____

REJECTED: _____

DATE PAID: _____

CHARGES: WA _____

SW _____

PLEASE NOTE THAT THE CONNECTION FEE IS TO BE PAID TO:
SOMERSET COUNTY SANITARY DISTRICT INC.

**PLEASE COMPLETE ALL INFORMATION REQUESTED FAILURE TO DO SO WILL
RESULT IN THE APPLICATION BEING REJECTED.**