

Commercial Application for Service



SERVICE REQUEST (Check All That Apply):

- Application for Water Service
 - Existing Service Connection (Existing Water Meter) or New Service Connection (New Water Tap Required)
- Application for Sewer Service
 - Existing Service Connection (Existing Sewer Tap) or New Service Connection (New Sewer Tap Required)
- Sewer Service Not Required (Connection to Septic Tank)
- Application for Fire Protection
 - Existing Fire Protection (Existing Sprinkler Heads) or New Fire Protection (Sprinkler Heads and/or Fire Protection Line)

Applicant Name: _____ Applicant Phone: _____

Business Name: _____

Business Address: _____ City: _____ State: ____ Zip: _____

Billing Address: _____ City: _____ State: ____ Zip: _____

Business Phone: _____ Fax: _____ Email: _____

Emergency Contact Person: _____ Title: _____ Phone: _____

Owner of Building (If different than Applicant): _____ Phone: _____

Date to Start Service: Next Day (\$25) Same Day (\$50) Other _____

FACILITY INFORMATION:

- Does the Business location have a lease agreement? YES NO
- Do you have a copy of the lease agreement? YES NO
- Will your Business require City Sanitation Service (Trash Pickup)? YES (If Yes see additional form) NO
- Describe the type of business to be conducted at this location (auto repair , machine shop, restaurant, medical care, food processing, etc.) _____
- If your business is a restaurant or other type of Food Service Establishment, it is mandatory that fats, oil, and grease pretreatment be provided in accordance to the City of Glasgow Ordinance 1948. Please describe what type of devices will be installed or utilized: _____
- Does your facility contain over 12,000 square feet? YES NO
- How many fire sprinkler heads exist or will be constructed in the facility? _____
- What type of cross connection plan will be or exist at your facility? _____

The Glasgow Water Company is not responsible for any damage incurred at time of water connection due to open faucets or water lines.

It is agreed that by submitting this application for service, the information contained herein is true and correct and the customer has reviewed the Glasgow Water Company Rules and Regulations and agrees to abide by and comply with the Rules and Regulations as its utility customer.

Printed Name of Customer

Customer Signature

Date

OFFICE USE ONLY

Engineering (reviewed by): _____ Date: _____

Pretreatment (reviewed by): _____ Date: _____

Service Available: Water _____ Sewer _____ Fire Protection _____

Approved Connection: Water (meter size/fee) _____/_____ Sewer (tap type/fee) _____/_____

Account #: _____ Meter #: _____ Work Order #: _____

Inside City: _____ Outside City: _____ School District: _____

Notes: