

# City of Pelham

## Application for New Tap

Check the appropriate box . Size of Tap requested

Water \_\_\_\_\_

Sewer \_\_\_\_\_

Gas \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone#: \_\_\_\_\_ Work Phone#: \_\_\_\_\_

Tap Fee \_\_\_\_\_ \*\*\* before paying fee city needs to determine if service is available to location

\_\_\_\_\_  
Signature of Clerk

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date