



SPRINGBORO

320 W. Central Ave.
Springboro, Ohio 45066
(937) 748-9791 PH
(937) 748-6860 FX
build@cityofspringboro.com

WATER AND SEWER PERMIT APPLICATION

ALL five sections must be completed for application to be processed

1

Residential Commercial

ADDRESS: _____

LOT NO: _____ PARCEL ID: _____

2

- CITY SUBDIVISION PLATTED BEFORE 9/1/94
- CITY SUBDIVISION PLATTED AFTER 9/1/94
- CROWN POINTE (SEWER ONLY) -GLENRIDGE II (SEWER ONLY)
- CLEACREEK ESTATES (WATER ONLY) -OTHER: _____

PERMIT TYPE:

3

- WATER AND SEWER^{1,2,3} -WATER ONLY¹ -SEWER ONLY^{2,3}
- ¹Water Tap Size: _____ inch(es). ²Average Water Usage (*Commercial Only*): _____ gal/month
- ³ Residential Sewer Line – 4” minimum; Commercial Sewer Line - 6” minimum.

4

<u>PLEASE PRINT</u>	Name	Address	Phone Number & Email <small>*BOTH REQUIRED TO PROCESS APPLICATION*</small>
Property Owner			
Contractor			
Applicant			

5

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her agent. The owner agrees to be governed by all the bylaws and regulations as established by the City Manager and all the ordinances passed and adopted by the Council of the City of Springboro for the management and protection of the Water Works, Storm Sewers, and Sanitary Sewer System of the City of Springboro. The owner further agrees to pay in advance the fees for making the desired water and/or sewer taps and inspections.

Applicant's Name: _____ Email: _____

Applicant's Signature: _____ Date: _____

OFFICE USE ONLY

APPROVAL: _____ DATE: _____