

Town of Anderson
P O Box 592 / 415 Hill St
Anderson, TX 77830
936-873-3102
townoffice@andersontx.gov



Sewer Connection		
_____	4" Tap	\$500
_____	6" – 8" Tap	\$1000

Sewer Connection Application

Property Information: Section: _____ Block: _____ Lot: _____

Physical Address: _____

Applicant Name: _____

Business Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____ **Phone #:** _____ - _____ - _____

Email Address: _____

Requested Connection / Property Use (check one): ____ Commercial ____ Residential / Single Family

Signature of Applicant: _____ **Date:** ____/____/____

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For Official Use Only

Anderson Water Company

Date Received: ____/____/____ **Size:** ____ 4" ____ 6" to 8" **Date Fee Received:** ____/____/____

Amount Received: \$_____ **Date Sent to Town:** ____/____/____ **Date Returned from Town:** ____/____/____

Date of Hook Up: ____/____/____ **Date Returned to Town:** ____/____/____

Comments: _____

Town of Anderson

Date Application Received From AWC: ____/____/____

Approved Building Permit on File: ____ Yes ____ No ____ N/A **Date Returned to AWC:** ____/____/____

Comments: _____
