# PERMIT
FOR
VILLAGE OF GRAND RAPIDS
SANITARY SEWER CONNECTION

PERMIT NO. _____ SEWER DISTRICT NO. _____ DATE _____
Expiration 120 days

FOR PARCEL NO. _____

LOCATED AT _____

PROPERTY OWNER'S NAME _____

ADDRESS _____ _____ _____ _____ _____
street city state zip telephone

BILLING
ADDRESS _____ _____ _____ _____ _____
street city state zip telephone

TYPE OF BUILDING LOCATED ON PARCEL _____

CONTRACTOR MAKING CONNECTION _____
Name

_____
Address

_____
City State Zip

_____
Registration Number

FEES AND CHARGES

PERMIT FEE .....$ 1.00

TAP-IN FEE .....$ _____

ROAD CUT FEE .....$ _____

INSPECTION FEE .....$ 4.00

TOTAL .....$ 5.00

DATE PAID _____

WATER SERVICE _____
(City of Well)

SEWER RENTAL CHARGE

City's Portion _____
Flat or Metered

County's Portion _____
Flat or Metered

INSPECTION RECORD (Filled In By Village's Inspectors)

Material _____ Date Approved _____

Location _____

Septic Tank Disconnect _____

_____

SIGNATURES

_____ _____
Date Applicant (Owner)

_____ _____
Date Applicant (Owner)

INSPECTOR _____
Name

Sewer Charge
Billing Started _____