

Please return completed and signed application to the **Transportation and Utilities Business Office, 555 S. 10th Street, Room 203, Lincoln, NE., 68508.**

Lincoln Transportation and Utilities Department

APPLICATION FOR WASTEWATER SERVICE

Date _____

_____ hereby makes application for a Sanitary Sewer service to the following described premises:

Lot Number _____ } _____
 Block Number _____ } (Street Address)
 Addition _____ } _____
 (Folio)

Said premises to be used for: _____

Size of requested service to be as follows: Check One:
 Tap Size _____ New Connection: Replacement Tap: Sewer stubbed:

As record title owner/owners of the above described premises, I/we hereby agree to abide by all the Rules, Regulations and Ordinances of the City Wastewater Department, now in effect or to be enacted, together with all the Laws, Rules, Regulations, Executive Orders and Ordinances of the City of Lincoln, now in effect to be enacted, and request that a Sanitary Sewer Permit be granted to

_____ Licensed Plumber, to install said Sanitary Sewer service.

Signed _____ By _____ Agent

Mailing Address _____

OFFICE RECORD

Checked for:	CHECKED	BY	DATE	Signed
MAIN	<input type="checkbox"/>			_____
OLD SERVICE	<input type="checkbox"/>			_____

Approved by Building Inspectors:
 Date _____
 Building Permit No. _____

Check One: City Water Supply _____ Private Supply _____ Ser. Order No. _____

PERMIT RECORD

Date _____

I certify that I am a Licensed Plumber of the City of Lincoln, Nebraska and have been issued

Sanitary Sewer Permit Number _____ for the purpose of installing said Sanitary Sewer service at _____ Street.

Signed _____ By _____

Witness _____