



APPLICATION FOR TRANSFER OF COMMERCIAL WASTEWATER SERVICE

City of Dripping Springs 511 Mercer Dripping Springs, Texas 78620 (512) 858-4725

Name of Business _____

Name of Owner _____
(IF THE OWNER IS A CORPORATION, ALSO PRINT THE NAME, ADDRESS AND TITLE OF A RESPONSIBLE CORPORATE OFFICER)

NAME AND TITLE OF RESPONSIBLE CORPORATE OFFICER _____

ADDRESS OF CORPORATE OFFICE CITY STATE ZIP PHONE NO.

Property Manager _____

Service Address (premises to be served) _____

Billing Address _____ Billing Contact Phone No. _____

Date of TRANSFER of premises: _____ Initial date of applicant's occupancy _____

Type of business occupying premises to be served: _____

Two Emergency/After Hours Contacts:

Name _____ Phone Nos. _____

Name _____ Phone Nos. _____

I request wastewater service from the City of Dripping Springs ("the City") at the Service Address listed above, agree to pay all rates, fees, deposits and other charges in the City's Wastewater Ordinance No. 1770.01, ex. A, sec. 12, adopted 7/8/08, as it may be amended from time to time, and agree to execute any wastewater line easements requested by the City and necessary for the service. **In accordance with the Ordinance, I agree to pay the City a Transfer Fee of \$30.00 for each wastewater connection. This charge will appear on my first sewer statement.** I understand that a copy of the Ordinance is available for review at the City's website, cityofdrippingsprings.com

I understand that the Application Fee was paid by the prior service applicant and included the City's installation of the sewer collection line and tap to the property line of the Service Address; however **I agree to be responsible for construction, installation and maintenance of the sewer line from the tap to the structure.**

I agree to be responsible for other all rates, fees, service deposits and other charges for wastewater service to the Service Address, and understand that I may be subject to service termination, interest and other charges for delinquent accounts, all in accordance with the provisions of the Ordinance, as it may be amended from time to time.

Authorized agent/Applicant's signature

Date

Printed

FOR CITY USE ONLY

by: _____

City's Representative