



TOWN OF ROMULUS

Municipal Water Permit Application

Please print all information. Submit the completed form and the appropriate fee to:

Town Secretary, Town of Romulus, P.O. Box 177, Willard, NY 14588

Fees are non-refundable. Payment may be made by personal check or money order payable to "Town of Romulus". The current fee schedule is available on the Town of Romulus website (www.romulustown.com) or by calling the main office (607 869-9326).

Date of Application: _____

Service Information (check one): New Service Existing Service (update)
 Continuing Service Seasonal Service

Account Number (for all except "New") _____

Contact Information

Property Owner

Name	
Mailing Address	
City, State, Zip	
Telephone	Email

Billing (if different from above)

Name	
Address	
City, State, Zip	
Telephone	Email

Authorized Agent (if different from Property Owner)

Name	
Mailing Address	
City, State, Zip	
Telephone	Email



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Contractor

Name	
Address	
City, State, Zip	
Telephone	Email

Property Information

Service Address(es)

Structure Information

Single Unit Residential Number of Structures		
Multi-Unit Residential Number of Structures	Number of Units	
Commercial Number of Structures	Number of Units	Number of People
Industrial Number of Structures	Number of Units	
Public Building Number of Structures	Number of People	

Current/Auxiliary Water Supplies

Do you have a well or wells on the property (either working or abandoned)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, location(s)		
Do you currently have a lake water supply system	<input type="checkbox"/> Yes	<input type="checkbox"/> No



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I certify that the statements and information herein contained are true to the best of my knowledge and belief and the proposed construction and use will comply with all applicable regulations.

I have reviewed and understand the current rules and regulations of the appropriate Water District and agree to comply.

I understand that a cross-connection survey (site visit) may be performed at the above service address and that backflow prevention requirements may be imposed at any time commensurate with the degree of hazard established by state laws, regulations, and codes.

I also grant permission for the Romulus Water Department or their agents to enter the property and structures thereon as frequently as necessary to inspect same for compliance.

Signature of Owner

Date

Signature of Authorized Agent

Date

Internal Use Only

Water District (check one): Romulus Route 89 Willard

Property Tax ID

Date Paid

Amount Paid

Cash Check – Check No.

Account No.

Meter Sequence No.

Date of – Onsite Survey

Installation

Final Inspection

Meter Serial No.

Meter EID

Meter Sealed By

Service Exemptions

Yes

No

Exemption Notes