



Permit No.: _____ Issue Date: _____
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CITY OF ALMA
PUBLIC UTILITIES INFORMATION FORM
 (For new public utility service only)

<u>NEW UTILITY INFORMATION</u> SANITARY SEWER CONNECTION Size of sanitary lead: _____ WATER CONNECTION Size of water tap: _____ Size of water meter: _____
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<u>UTILITY BILLING INFORMATION</u> Mail monthly bills to: Name: _____ Billing Address: _____ _____ _____ Telephone: _____
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The **Permit No.** is the upper right corner of this form references the Public Services Permit Number. This form must be completed and becomes part of the Public Services Permit for all new water and sanitary sewer services.

By: _____ Date: _____
 Service Applicant's Signature

 (Print Name)

Original, signed form must be presented to
City of Alma Public Services Department for formal processing.