

# Tyngsborough Water District

87 Progress Ave, Unit #2  
Tyngsborough, MA 01879  
(978)649-4577



## Application to connect to water

The undersigned agrees to the terms and rules of the Tyngsborough Water District. The property owner is responsible for the upkeep and repair of the service line between the water main in the street and the connection in your home. The Water District will repair and/or replace the service line on Town property. The repair and/or replacement of the service line on your property, however, must be undertaken by you using an installer licensed by the Water District. This installer will be responsible for any damage to your property (i.e. lawns, shrubs, and pavement). A list of these licensed installers can be obtained from the Water District. Curb boxes, valve boxes, water meters and backflow preventers must be accessible. All work must comply with the Rules and Regulations of the Tyngsborough Water District, Town of Tyngsborough DPW, Massachusetts DEP and the Massachusetts State Plumbing Code 248 CMR.

### To be completed by the Installer:

Installers Name: \_\_\_\_\_

Installers Signature: \_\_\_\_\_ Date: \_\_\_\_\_

TWD License # \_\_\_\_\_ Plumbing Permit# \_\_\_\_\_

Dig Safe # \_\_\_\_\_ Plumbers Name: \_\_\_\_\_

Town Road Opening Permit # \_\_\_\_\_ Backflow Preventer Permit: Yes \_\_\_\_\_ No \_\_\_\_\_ # \_\_\_\_\_

Trench Permit # \_\_\_\_\_ \*(*Mandatory* - issued by the Town of Tyngsborough Building Department)

Sewer or Septic mark out \_\_\_\_\_ Plans attached: Yes \_\_\_\_\_ No \_\_\_\_\_

Service Size \_\_\_\_\_ " Fire sprinkler connection \_\_\_\_\_ " Lawn irrigation connection \_\_\_\_\_ "

### To be completed by the Property Owner:

Name of Property Owner \_\_\_\_\_

Owners Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Address to be connected: Street \_\_\_\_\_

Lot # \_\_\_\_\_

Billing address: Street \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_

### To be completed By the Tyngsborough Water District:

Connection fee received: Amount: \$ \_\_\_\_\_ Check # \_\_\_\_\_

Date: \_\_\_\_\_ By: \_\_\_\_\_

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_ As Built Plan: \_\_\_\_\_

Meter: Size \_\_\_\_\_ # \_\_\_\_\_ Date: \_\_\_\_\_

Radio Read # \_\_\_\_\_ Start at: \_\_\_\_\_

Account# \_\_\_\_\_