



# City of Asotin

[www.cityofasotin.org](http://www.cityofasotin.org)

Phone: 509-243-4411

PO Box 517

121 Cleveland Street

Asotin WA 99402

Fax: 509-243-1223

## Application for Sewer/Water Connection

**Applicant Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Work Phone:** (\_\_\_\_) \_\_\_\_\_ **Home Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_

**Property Owner Name (if different):** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Current Zoning:** \_\_\_\_\_ **Lot #:** \_\_\_\_\_ **Subdivision:** \_\_\_\_\_

**Legal Description:** \_\_\_\_\_

Please attach all plans of the proposed connection showing the whole course of the sewer and water from the house or building to the point of connection with the City Sewer and Water System. Show the location of all branches, wyes, traps and plumbing fixtures to be connected. Show outside dimensions of building(s) served, property line, and adjacent roads.

I, as owner of the above described property, hereby make application to connect onto the City of Asotin Sewerage and Water System and agree to comply with all Federal, State, City and County laws, regulation, codes and ordinances in effect regarding the use of the system and installation of the Sewer and Water.

*The Applicant does hereby certify that all of the above statements and information in any attachments transmitted herewith are true under penalty of perjury by the Laws of the State of Washington.*

*Signature (Applicant):* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Signature (Landowner, if different):* \_\_\_\_\_ *Date:* \_\_\_\_\_

<b>Sewer Alteration Fee/TAP Inspection fee</b>	<b>\$ 400.00</b>	<b>408</b>	<b>343 50 00 003</b>
<b>Sewer Hookup-Connection Fee</b>	<b>\$1,200.00</b>	<b>408</b>	<b>343 50 00 003</b>
<b>1" Water Meter/Connection Fee</b>	<b>\$2,500.00</b>	<b>408</b>	<b>343 40 00 002</b>
<b>*Street Cut</b>	<b>\$ 500.00</b>	<b>103</b>	<b>369 91 00 002</b>

**\*Street Cuts charge for any cut through asphalt, pavement, concrete and/or cement.**

**Please Remit Application Fees to:**

City of Asotin

PO Box 517

Asotin WA 99402

Please call 243-4411 with any questions [cityclerk@cityofasotin.org](mailto:cityclerk@cityofasotin.org)



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**FOR OFFICE USE ONLY**

**Date Rec'd:** \_\_\_\_\_ **Rec'd By:** \_\_\_\_\_

*Signature (City of Asotin Mayor):* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Signature (City of Asotin Building Inspector):* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Signature (City of Asotin Public Works):* \_\_\_\_\_ *Date:* \_\_\_\_\_  
*Water & Sewer*