



SEWER CONNECTION APPLICATION

PO Box 458 * Veneta, OR 97487 * 541-935-2191 * 541-935-1838 * www.VenetaOregon.gov

Residential

Commercial

Other

Applicants Name: _____ Phone #: _____

Service Address: _____ Permit#: _____

Mailing Address: _____

Street/PO Box _____ City _____ State _____ Zip _____

Assessor's Map: _____ Subdivision or Tax Lot#: _____

Contractor's Name: _____ Phone #: _____

Contractor's CCB: _____ Expiration Date: _____

I hereby apply to the City of Veneta for permission to install a sanitary sewer service connection for the property listed above. I agree to comply with all City of Veneta regulations governing the installation and operation of sanitary sewer lines. I also agree that no work shall begin until approval has been granted by the City and as-built drawings of the installation have been submitted and approved.

Applicant's Signature

Date

FOR CITY HALL OFFICE USE

Fees

Approved: Tap & Cut into sewer as shown. _____

Hook-up Charge: _____

Approved: Connect to stub as shown _____

System Dev. Charge: _____

Approved: Re-connect to previous connection as shown _____

Date Paid: _____

Denied: For reasons specified below _____

Receipt #: _____

City of Veneta Public Works Director

Date