

## Water/Wastewater Application For Service, Ownership Change and Tap Discontinuance Form

## **City of Victor**

500 Victor Ave, P.O. Box 86 Victor, CO 80860 719-689-2284

solve					Acct #_		
Owner Information Property Owner:	(Proof of ow	nership is r	required)				
Subject Property							
Address:	City:		State:		Zip:		
Owner Mailing							
Address:	City:		State:		Zip:		
Phone/Email:	Phone:						
Request Informatio	n (please che	eck appropr	riate boxes k	elow):			
☐ Ownership Chan	ge						
☐ New Tap:	□Water	□Sewer		□Resident	ial	□Commercial	
	□Inside Cit	у	□Outside	City			
☐ Discontinue Tap	(Must sign ce	ertification	on page 2)				
Owner Certification	ıs:						
			•		•	the City for the install	
						ly billing will begin onc	
	-					first. I (we) also agree	-
					-	r by contacting City Ha	
	_	•				(we) agree the City ass	
					_	on the water. I (we) ag s set by City Council, a	
· ·			-	-		ining unpaid and deling	
	-	_	-			pon my property as is	
•	•	-		•		irs, maintenance and n	•
					-	he City of Victor Munic	
, ,	· ·		·			,	•
Signature					Date		
For Office Use Only	<i>'</i> :						
Effective Date:		Complete	d by:		Work Ord	ler Date:	
Water Tap Size:		-	Size:				
Water PI Fee:		Sewer PI	Fee:				

Owner Certification for Di	scontinuance:							
As the owner of record, I	hereby request that water ar	nd wastewater service at the above listed property be						
discontinued effective	·	I understand that once service is disconnected at this						
location, payment of the plant investment fee and any other costs associated with the reconnection of the								
service per the City of Vic	tor Fee and Fine Schedule wi	Il be necessary to resume service.						
Signature		Date						
For Office Use Only:								
Effective Date:	Completed by:	Work Order Date:						