

APPLICATION FOR TRANSFER OF RESIDENTIAL WASTEWATER SERVICE

City of Dripping Springs 511 Mercer Dripping Springs, Texas 78620 (512) 858-4725

Name of Applicant _____ TX D.L. or ID No. _____ D.O.B. _____

Service Address (premises to be served) _____

Mailing Address (if different) _____ Phone No. _____

Owner/Manager of premises to be served (if different from applicant) _____

Date of TRANSFER of premises: _____ Initial date of applicant's occupancy _____

Number of persons occupying premises to be served: _____ Number of minors: _____

Employer _____ Address _____ Phone No. _____

Two persons to contact in event of emergency (other than the Applicant):
Name _____ Address _____ Phone No. _____

Name _____ Address _____ Phone No. _____

I request wastewater service from the City of Dripping Springs ("the City") at the Service Address listed above, agree to pay all rates, fees, deposits and other charges in the City's Wastewater Ordinance No. 1720.3, as it may be amended from time to time, and agree to execute any wastewater line easements requested by the City and necessary for the service. **In accordance with the Ordinance, I agree to pay the City a Transfer Fee of \$30.00 for each residential wastewater connection.** I understand that a copy of the Ordinance is available for review at the City's website, cityofdrippingsprings.com.

I understand that the Application Fee was paid by the prior service applicant and included the City's installation of the sewer collection line and tap to the property line of the Service Address; however **I agree to be responsible for construction, installation and maintenance of the sewer line from the tap to the residential structure.**

I agree to be personally responsible for other all rates, fees, service deposits and other charges for wastewater service to the Service Address, and understand that I may be subject to service termination, interest and other charges for delinquent accounts, all in accordance with the provisions of the Ordinance, as it may be amended from time to time.

Applicant's signature Date of Application: _____

Applicant's name printed

FOR CITY USE ONLY

Received: \$30.00 transfer fee by: _____

City's Representative / Rebeca Rubio, Utilities Coor.