1100 Main Street PO Box 108 Trenton, MO 64683 Office:(660) 359-2281 Fax: (660) 359-2284

www.trentonmo.com

cservice@trentonmo.com

TRENTON MUNICIPAL UTILITIES

WATER TAP PERMIT

Permit Fee (materials are billed in addition to the permit fee): 1" or less = \$90.00 2" or 4" = \$185 6" = \$365.00

Application Date:



For questions and scheduling contact TMU Water Department at (660) 359-2838

				OWNER				
				JVVINER				
Name:					Phone Number: ()			
Service Address:					Alternate Phone: ()			
Mailing Address, City,	State, Zip):						
Replacement Tap:		New Tap:			Date Work to Start:		Time:	
Replacement Service:		New Servic	٥:		Date Inspection		Time:	
		UST be sched		TMU a MININ	Requested: MUM of 2 day	s in adva		
	TN	1U will complet	e taps bet	ween the hour	s of 8 am and	2 pm.		
			CON	ITRACTOR				
			CON	IIKACIOK		Dh	one Number	/)
Company Name:							ernate Phone	· /
Contact Person:							Number	/ \
Mailing Address, City,	State, Zip	:						
COMMENTS:								
All material and workn All work associated wi The contractor or prop Obtaining a Rig Having a City o Contacting Miss	ith excava perty owned ht-of-Way f Trenton	tion, installation or is responsible opermit if nece business licens	n, etc. sha e for the fo ssary se if requir	Il be complete ollowing items,	d by the prope including, but	erty owne not limite	r and/or co ed to:	
OFFICE USE ONLY					Payment:	Cash	Check	Credit Card
Application received	Date:		Ву:		•			
•				Doto	Cont Dv	Fax or	ROW	Business
Copy sent to:				Date	Sent By	email	Permit	License
Water Distribut								
Building Inspec		e Enforcement						
Street Departm					Notes and/or Sk	etch:		
TMU Review	Date:		Ву:		-			
Size of Main:		Depth:			-			
Direction of tap	•		_ (ie: 2:00	or 10:00):				
Distance from r	nearest		_:					