

ARLEE/LAKE COUNTY WATER AND SEWER DISTRICT
PO Box 272, Arlee, MT 59821
(406) 214-4981

Application for Sewer Service: (\$25.00 fee due with application)

Account # _____

Physical address and legal description of the property: _____

I, (Print name) _____ the undersigned, being the owner of the property indicated above, do hereby request the following service by the Arlee/Lake County Water and sewer District.

- ___ New Sewer Connection to the Main: \$1500.00 fee.
- ___ New Sewer Connection and Service at an Existing "T": No additional fee.
- ___ New Owner of Property with Existing Connection and Service: No additional fee.
- ___ New Owner of Property with Existing Connection but Interrupted Service*: Variable fee, \$200 to Max. of \$500.
- ___ Excavation of an Existing Connection to the Main and/or the Sewer Line from the Structure to the Main: \$100 fee. **Note:** Montana law requires a call to One-Call (dial 811) for utility locations prior to any excavation.
- ___ Other service (fee to be determined) _____

Name, address and phone number of contractor to complete the work: _____

Note: Contractor must be bonded and approved by the district:

In consideration: I the undersigned

1. agree to comply with all the policies and regulation of the District, current and future. Failure to do so may result in discontinuation of the service, notification of proper authorities, and forfeiture of all fees paid.
2. agree to pay all fees and service charges established by the district when due.
3. agree to pay bills due the district within 15 days of the bill date. Late payments will accrue a \$5.00 late fee. Continued nonpayment may result in termination of service, property liens or other legal action. Insufficient fund checks must be redeemed with an additional \$30.00 fee.
4. agree that in the event of disconnection of the sewer line, reconnection will be treated as a new connection with a \$1500.00 fee.
5. understand that this application along with applicable fees must be submitted to the district **before any work begins**. All connections must be approved and inspected by district personnel prior to backfilling which must include approved backfill materials.

Applicant Signature: _____

Date: _____

Mailing address & phone _____

District Use:

Service fee: _____ Application approved: _____ Contractor approved: _____

Initial site inspected and plan approved, _____, by _____, Date: _____

Final site inspected and work approved, _____, by _____, Date: _____

Notes:

EDU's determined for new or altered connections: _____

*Interrupted Service: A location, where due to death, abandonment, or other circumstance, there has been a period of nonpayment or evidence of habitation for a period of six months, is deemed to exhibit a situation of interrupted service.