



APPLICATION FOR SERVICE

Complete and return this form with all required documents and information to:

Scott County PSA
 156 Legion Street
 Weber City, VA 24290
 276-386-3401

OFFICE USE ONLY	
Received: ____/____/20____	<input type="checkbox"/> Water <input type="checkbox"/> Sewer
	<input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential
If Non-residential., meter = ____-inch	
Connection fee paid: \$ _____	
Deposit paid: \$ _____ Admin. Fee paid: \$ _____	
Account No. _____ Meter No. _____	
Connected: ____/____/20____	
Disconnected: ____/____/20____	
Scanned: <input type="checkbox"/> Staff initials: _____	

Please mark all the appropriate boxes and fill in the required blanks:

Type of service:	<input type="checkbox"/> Water	<input type="checkbox"/> Sewer	Check one: <input type="checkbox"/> Existing system <input type="checkbox"/> New project Project name: _____
Type of connection:	<input type="checkbox"/> Residential <input type="checkbox"/> Single family <input type="checkbox"/> Multi-unit	<input type="checkbox"/> Non-residential <input type="checkbox"/> Single tenant <input type="checkbox"/> Multi-unit	
Building status:	<input type="checkbox"/> Existing	<input type="checkbox"/> Not yet built	Occupancy date: ____/____/20____
Ownership status:	<input type="checkbox"/> I own this property	<input type="checkbox"/> I rent this property (If renting, owner must complete lower section.)	
Applicant name:	First: _____	Middle: _____	Last: _____
PSA account status:	<input type="checkbox"/> Have current account	<input type="checkbox"/> Had previous account	<input type="checkbox"/> Never a SCPSA customer
Service Address:	Street/POB: _____	City: _____	State/Zip: _____
Mailing Address: <small>(If same, leave blank.)</small>	Street/POB: _____	City: _____	State/Zip: _____
Telephone Nos.:	Primary: _____	Secondary: _____	
Email address:	Your bill will be sent here: _____		
Security info:	Date of birth: / /	Social Security Number: _____	
Driver's License:	State: _____	Number: _____	Exp. Date: _____
Health certification: <small>Code 15.2-5138(3)</small>	<input type="checkbox"/> No applicable health issues	<input type="checkbox"/> Yes, and submitted health endangerment certification	
Bills are sent by email only	If you want your bill by USPS, enter the address: _____	Street/POB: _____ City: _____ State: _____ Zip Code: _____	
We use autopay by bank draft	Attach either a voided check or the account information printout from bank Type of account: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		<input type="checkbox"/> Opt out of autopay

I, the above named Applicant, certify that the above information is correct and that I have read and agree to the "TERMS AND CONDITIONS FOR WATER AND SEWER SERVICE" on the reverse side of this form.

Applicant Signature: _____ Date: ____/____/20____

If the Applicant is leasing the property that is to be served, the property owner must complete this section:

Property Owner Name:	_____		
Mailing Address:	Street/POB: _____	City: _____	State/Zip: _____
Telephone Nos. :	Primary: _____	Secondary: _____	
Email address:	_____		

The above Applicant has entered into a lease for the property located at the above listed Service Address and I as Property Owner or authorized representative hereby authorize the Applicant to obtain water or sewer service at this address as a tenant.

Property owner signature: _____ Date: ____/____/20____

TERMS AND CONDITIONS FOR WATER AND SEWER SERVICE

1. Customer will abide by Scott County Public Service Authority (SCPSA) Rules and Regulations, the SCPSA Cross Connection Control Program, applicable Scott County ordinances, the Virginia Plumbing Code, and the Uniform Statewide Building Code.
2. Customer will pay all SCPSA charges, including connection fee, deposit, administrative fee, monthly use charges, penalties and reconnection fees.
3. SCPSA will provide sufficient water and sewer system capacity to serve Customer's connection, including a minimum pressure of 20 psi at customer's water meter under normal conditions as required by state regulations.
4. SCPSA will mail bills before the 1st of each month. Customer payment is due the 10th of each month and SCPSA will assess a 10% penalty if payment is made after the 10th of the month. SCPSA will disconnect service if a bill is not paid by the 20th of the following month.
5. Customer will allow SCPSA to inspect the customer's water and sewer plumbing at any reasonable time deemed necessary by SCPSA to verify there are no cross connections or other hazards to the SCPSA water or sewer system.
6. Customer will keep their water meter and the first sewer cleanout accessible at all times and will give SCPSA the right of ingress and egress to the meter or the first sewer cleanout for the purpose of meter reading, cross-connection prevention, sampling, repair and maintenance of SCPSA lines and equipment, or other necessary operations.
7. Customer will install and maintain all plumbing on the customer's side of the water meter or sewer tap (unless installed by SCPSA as part of a new waterline project). This includes installing (1) the water service line to the SCPSA meter, plus any PRV or cutoff valve required by the building code on the customer's side of the water meter, and (2) the sewer service line (at a minimum slope of 1/8 inch per foot) to the SCPSA sewer tap; and repairing leaks in the customer's plumbing.
8. Customer will contact SCPSA prior to backfilling and covering Customer's new water or sewer service line. This is for SCPSA's benefit to allow SCPSA to inspect the connection of the water or sewer service line. This inspection does not replace any inspection required by the Scott County Building Official.
9. Customer will disconnect all private sources of water (wells, springs, cisterns, etc.) from the building plumbing before connecting to the SCPSA meter.
10. Customer will prohibit extension of the customer's service line to serve additional customers. All customer connections must have a separate SCPSA meter or a separate sewer tap.
11. SCPSA has a Water Leak Adjustment Policy with the following main stipulations: (1) The leak must be on the customer side of the meter; (2) The customer must request the adjustment after repairing the leak; (3) The leak must have caused the water usage to exceed 3 times the normal usage; (4) The adjustment may be applied to two consecutive months; and (5) A leak adjustment may only be done once in 12 months.
12. Customer will inform SCPSA of any changes to their account, including name and billing address changes.
13. Customer will prevent the discharge of the following into the SCPSA sewer system: storm water, surface water, groundwater, roof runoff, swimming pool discharge, and condensate. This includes discharges from sources of runoff, rain, or groundwater including sump pumps, gutters, downspouts, and storm drains.
14. Customer will prevent the discharge of materials into the SCPSA sewer that are harmful to the SCPSA sewer system and the wastewater treatment processes, including greases, oils, petroleum products, flammable liquids, corrosive liquids, toxic chemicals, pesticides, and solids with a dimension larger than ½-inch.
15. Customer must sign and submit the SCPSA form "Authorization to Turn On Water Service Waiver and Release of Liability".