

## **NEW RESIDENTS INFORMATION REGARDING SEWER SERVICE**

**ALL NEW RESIDENTS MUST CONTACT JAMIE MARSH @ 731-5819  
SO THAT SHE MAY SET UP YOUR SEWER SERVICE ACCOUNT  
ALSO**

**THE APPLICATION BELOW MUST BE COMPLETED AND TURNED INTO JAMIE @ 4150 SOUTH 3900  
WEST - AS SOON AS YOU MOVE INTO YOUR NEW HOME**

### **IF YOUR HOME IS COMPLETED:**

**Monthly Sewer Service Rate Fee: \$33.00**

**To Be Billed by Special District Each Month and Paid by Homeowner**

### **IF YOU ARE BUILDING A HOME:**

**Sewer Connection Impact Fee: \$2,159.00**

**Paid By Building Permit Applicant, when building permit is received:**

**(A SEPARATE CHECK Must Be Issued to West Haven Special Service District - in the amount of \$2,159.00 - DO NOT include this with check for building permit made to West Haven City)**

**NOTE: A Separate "BUILDING PERMIT PACKET" will be issued to the person picking up the building permit. That person will be responsible for getting the "CUSTOMER APPLICATION FOR SEWER SERVICE" (included in the packet) to the homeowner and informing them of the fees, or, having them contact the City Office.**

**IN EITHER SITUATION – THE APPLICATION BELOW MUST BE COMPLETED AND TURNED INTO JAMIE MARSH. REFER TO THE SECTION ON "SEWER" UNDER "DEPARTMENTS" FOR MORE INFORMATION AND OPTIONS.**

**WEST HAVEN SPECIAL SERVICE DISTRICT**

4150 SOUTH 3900 WEST  
WEST HAVEN UT 84401

**PHONE: 731-5819 FAX: 731-1002**

APPLICATION FOR SERVICE

ACCOUNT # \_\_\_\_\_

**\*THIS MUST BE COMPLETELY FILLED OUT\***

**\*BEFORE FINAL INSPECTION\***

**ADDENDUM "A"**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

BILLING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP-CODE \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_

I (we hereby apply to the West Haven Special Service District (the "System")  
The required deposit for sewer service located at (ADDRESS)

\_\_\_\_\_ ("the Premises") and agree:

1 – To pay all hook-up, impact and related fees ( if it is a new connection), the required deposit and the service fee prescribed by the system for sewer service.

2 – To pay the service charges for sewer service as fixed by the System. If a person, partnership, firm or corporation other than the undersigned occupies or is a tenant of the Premises, as an inducement to the System to provide sewer services to the Premises, the undersigned agrees to pay for all sewage services furnished to said premises according to the rules and regulations as have been or may hereafter be prescribed by the System. I understand and agree that the System may have an arrangement with the entity from which the Premises receives culinary water service under which the culinary water service may be disconnected due to a failure to pay sewer charges or to otherwise abide by the rules and regulations of the System. In the event of failure to pay the sewer charges within thirty days from the date when due, the System shall have the right to shut off both the water (subject to arrangements with the water supplier) and sewer, or either, at its election, pursuant to written notice of the System's intention to do so as provided from time to time in the rules and regulations of the System. The written notice may be delivered solely to the Premises and the System shall have no obligation to see to it that applicant receives actual notice of the intention to discontinue service. It shall be the applicant's responsibility, particularly if the applicant is not the occupant of the Premises, to take such steps as to insure that applicant will receive copies of any notices either mailed or delivered to the Premises, even if the billing address is different from the Premises. Where the billing address is different from the premises, the System may, but shall not be obligated to, also provide a notice of intention to the discontinue service to the billing address. If the occupant of the Premises is someone other than the applicant, particularly where bills are to be sent of the Premises, applicant acknowledges that applicant may not be notified regarding past due amounts or shut off notices and that it is applicant's responsibility to inquire of the System concerning such matters and to monitor bills and notices sent or delivered to the Premises.

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**WHSSD APPLICATION**

3 – That the System and/or the water supplier may cause a lien to be placed against the Premises for unpaid service fees and charges to the extent an in the manner allowed by law.

4 – To be bound and governed by such rules and regulations as have been or may hereafter be prescribed by the System including, but not limited to, the payment of any penalty or interest on any service fee or other sum not paid to the System as and when due.

5 – To make one or more deposits as required by the System prior to the receipt of service. It is agreed and understood that the System may, but need not, apply any deposit upon bills due for service, and that the right of the System to shut off the service as outlined in paragraph 2 above shall exist even though the deposit has not been applied to the payment of past-due bills for such service. Upon final settlement of applicant's account, any unused balance of the deposit will be refunded to the applicant upon presentation of proof of entitlement thereto.

6 – That deposit shall not be made as an advance payment of any service. Charges and unpaid accounts shall be considered delinquent notwithstanding the existence of such deposit, and applicant or the user of such service shall not have the right to compel the System to apply such deposit to any account to avoid delinquency.

7 – That the deposit will not earn or accrue interest.

8 – To pay all costs and expenses, including a reasonable attorney's fee, which may arise or accrue to the System through its efforts to collect any delinquency.

9 – that the undersigned applicant is either the owner of the premises or the duly appointed agent of the owner and is authorized and empowered to make this application binding against the Premises and that the purpose for which such service connection(s) will be used is

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APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

DATE IN \_\_\_\_\_ (NOT –TRANSFERRABLE, NO INTEREST PAID ON DEPOSIT)

EMPLOYER \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS IF DIFFERENT

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