



Village of Monroeville
21 N Main St. ~ P.O. Box 156
Monroeville, Ohio 44847

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SANITARY SEWER TAP APPLICATION

Applicant name: _____ Applicant ph. #: _____

Owner: _____ Contractor: _____ Other: _____

Applicant's address: _____

Application is hereby made to the Village Water/Wastewater Department for:

(Enter quantity of sewer connection(s) to be installed): Total: _____ Pipe Size: _____

Residential: _____ Commercial: _____

Location of proposed sanitary sewer tap: _____

Situated on: _____ Street between: _____ and _____ Streets

Connection Point: Manhole _____ Sewer Main _____

Connection Location: Roadway _____ Right-of-Way _____

****CONNECTION IN THE ROADWAY WILL REQUIRE A STREET OPENING PERMIT****

Street opening permit completed and returned: Yes _____ No _____

The Tapping, Drain Laying and Connections will be done by:

Name: _____

Address: _____

Fee: \$100.00 Date paid: _____ Applicant Signature: _____ Date: _____

OFFICE USE ONLY

Approved by: _____ Title: _____

Date: _____

Comments: _____

Disapproved by: _____ Title: _____

Reason: _____