

**CITY OF EAST PROVIDENCE  
 WATER UTILITIES DIVISION  
 60 Commercial Way, East Providence, RI 02914  
 Phone: 401-435-7741 FAX: 401-435-7745  
 APPLICATION FOR WATER SERVICE**

Application is made for approval of installation of a water service from the city water main to the property located at:

\_\_\_\_\_  
**Street Address**

as identified on city maps as Map/Block/Parcel: \_\_\_\_\_

	<b>MAP</b>	<b>BLOCK</b>	<b>PARCEL</b>
New construction _____	Existing Building _____		
Requested Service Size: _____	3/4" _____	1" _____	2" _____
	6" _____	8" _____	

**COPPER PIPE TYPE "K" ONLY TO BE USED FOR ALL SERVICES UP TO 2". CALL 24 HOURS BEFORE FOR INSPECTION ON ALL SERVICE INSTALLATIONS.**

Type of Service: Domestic \_\_\_\_\_ Fire Protection \_\_\_\_\_ (Fire System Plans Attached Y \_\_\_\_\_ N \_\_\_\_\_)  
 Proposed Building Use: Residential \_\_\_\_\_ (Single Family \_\_\_\_\_ OR Multi-Family \_\_\_\_\_ No. of Units \_\_\_\_\_)  
 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 Nature of Business \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby agree to take and use water, to pay the established rates, and I agree to be governed by the rules and regulations of the City.

_____ Authorized Signature	_____ Print Name	_____ Application Date
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**Do Not Write Below this Line – Office Use Only**

Water Available Yes \_\_\_\_\_ No \_\_\_\_\_  
 Main in Front of Lot Yes \_\_\_\_\_ No \_\_\_\_\_

Confirmed By \_\_\_\_\_

**FEES**

Service Cost \_\_\_\_\_  
 Other Costs \_\_\_\_\_  
 Total Due \_\_\_\_\_

Meter Size \_\_\_\_\_  
 High or Low Service \_\_\_\_\_  
 Sewer EP \_\_\_\_\_ NBC \_\_\_\_\_  
 Assigned Service Code \_\_\_\_\_

**Treasury Division**

Payment Rec'd \_\_\_\_\_  
 Date \_\_\_\_\_  
 Rec'd By \_\_\_\_\_

Application Approved By \_\_\_\_\_  
 Date \_\_\_\_\_