



TOWN OF GEORGINA
REGIONAL MUNICIPALITY OF YORK

APPLICATION FOR INSTALLATION OF WATER AND SEWER LATERAL

Name of Owner: _____ Property Description – Roll No: _____
 Address of Owner: _____ Reg. Plan No: _____ Lot No: _____
 _____ Town Lot No: _____ Concession: _____
 _____ Municipal Address: _____
 Owner Phone No: _____ Contractor: _____
 Contractor's Phone No: _____ Address: _____

Residential Commercial Industrial Institutional Meter Required

The undersigned hereby applies to have water and/or sanitary sewer laterals installed to the street line of the above noted property and agrees to pay the deposit amounts as noted below. Upon completion of an estimated cost the undersigned agrees to pay the difference between the amount of deposit paid and the estimated cost prior to the installation of the services. Unforeseen costs due to factors beyond the control of the Town such as dewatering, imported backfill material, poor ground conditions; existing utilities conflict etc. shall be borne by the undersigned. **Upon completion of the works the difference between the actual costs and the estimated cost shall be paid by the undersigned upon receipt.** The Town will reimburse the undersigned when costs incurred are less than the estimated costs.

| ITEM | DIMENSIONS | ESTIMATED COSTS | ACTUAL COSTS |
|--|------------|-----------------|--------------|
| Water Service, Std. | 25mm (1") | | |
| Sanitary Sewer Service, Std. | 125mm (5") | | |
| Water Service, Other | | | |
| Sanitary Sewer Service, Other | | | |
| Concrete Sidewalk (\$500.00 minimum) | | | |
| Area of Sidewalk (m ²) | | | |
| Concrete Curb & Gutter (\$500.00 minimum) | | | |
| Length Curb & Gutter (m ²) | | | |
| Asphalt Depth (mm) | | | |
| Area of Asphalt (m ²) | | | |
| Top Soil and Sod Restoration (m ²) | | | |
| Radio Read Standard Water Meter (3/4")(1") | | | |
| Water Meter (Other) | | | |
| Road Closure | | | |
| Other | | | |
| TOTAL | | | |
| 15% Administration Fee | | | |
| SUBTOTAL | | | |
| HST | | | |
| TOTAL ESTIMATED COSTS | | | |

_____ Date _____ Signature of Property Owner

15% Administration Fee covers the cost of services provided by the Town of Georgina Water/Wastewater Division on all applications.

OFFICE USE ONLY

Account Number Deposit Amount

4-1-1511000-079 (\$5,000.00) \$ _____
 5-1-1512000-0719 (\$10,000.00) \$ _____
 1-4-95-31000-7532 (Water Meter) \$ _____