



2501 WOODLAND ROAD | AMBRIDGE, PA 15003

HARMONY TOWNSHIP MUNICIPAL AUTHORITY SEWER SERVICE APPLICATION

APPLICATION DATE _____ OWNER RENTER

APPLICANT NAME(S) _____

SERVICE ADDRESS _____

TELEPHONE NO. _____ EMAIL _____

PARCEL NO. _____ SERVICE BEGIN DATE _____

PREVIOUS ADDRESS _____

EMPLOYER NAME _____

WORK ADDRESS _____

WORK TELEPHONE NO. _____

By signing below, I/We hereby make application for use of sewer services and agree to be governed by the rates, rules and regulations as adopted by Harmony Township and further agree that I/We shall not permit surface water, subsurface water, or roof drainage to be connected to, or enter the sanitary sewer system from the described premises.

I/We understand that the sewer bill is separate from the water bill and is due quarterly: January, April, July, and October. I/We agree that failure to receive a bill does not relieve me/us from payment.

I/We agree that in the event of default on any of the payments hereinabove agreed to be made, then the proper officers of Harmony Township are hereby authorized and empowered to request and direct the Borough of Ambridge Water Authority to shut-off and discontinue water service to the premises above described, covered by this application, until as and when all such overdue charges, together with any penalties and interest thereon shall be paid and satisfied. The charges incurred shall include the cost of turning off the water service and the cost of returning water service. Harmony Township will not accept personal checks to restore terminated water service.

SIGNATURE _____ DATE _____

SIGNATURE _____ DATE _____

TOWNSHIP USE ONLY:

ASSIGNED SEWER RENTAL FEE ACCOUNT NO. _____