

APPLICATION FOR SEWAGE TAP

**East Huntingdon Township
P.O. Box 9
Alverton, PA 15612-0009
Phone: 724/887-6141 or 724/887-7480**

Date: _____

Inv. No. _____

Name: _____

Address: _____

Phone: _____

Tap Fee Amount Paid: _____

Ck. No.: _____

Ck. No.: _____

Ck. No.: _____

Ck. No.: _____

Ck. No.: _____

Authorized Signature

Inspection Date: _____

Inspector Signature: _____