CITY OF BLOOMINGTON UTILITIES

APPLICATION REQUEST FOR NEW WATER / SEWER CONNECTION (ONLY FOR COMMERCIAL/BUSINESS, MULTIPLE DWELLING RESIDENTIAL, AND INDUSTRIAL SERVICES)

Is property for which service is being requested located within the City of Bloomington city limits? Yes No 18-digit Parcel#
If not in city limits, a copy of the deed must be submitted with this application, and a notarized "Waiver of Protest to Annexation" me be completed. Date copy of deed submitted to Legal Date completed "Waiver" signed
Date service is desired:
WATER SEWER FIRE LINE LAWN SPRINKLER
PROPERTY INFORMATION: COMMERCIAL INDUSTRIAL MULTI-FAM RESID UNIT COUNT
ADDRESS
PROJECT NAME LOT #
OWNER: Party to be billed connection fees
COMPANY NAMETELEPHONE
CONTACT NAMETELEPHONE
ADDRESS
CONTRACTOR INFORMATION: Party to be billed connection fees RIGHT OF WAY PERMIT #
COMPANY NAMETELEPHONE
CONTACT NAMETELEPHONE
ADDRESS
WILL THERE BE ANYTHING OTHER THAN HUMAN WASTE DISCHARGED TO THE SANITARY SEWER AT THIS ADDRESS? YES / NO
IF YES, COMPLETE INDUSTRIAL PRETREATMENT FORM: Questionnaire Application
DOMESTIC DEMAND FLOW: LIST QTY OF EACH FIXTURE BELOW
Bathtub Drinking Fountain Shower Head Bar Sink Hose Bib Service Sink Urinal, Pedestal Urinal, Pedestal Urinal, Wall Urinal, Wall Urinal, Wall Urinal, Wall Urinal, Tank Urinal, Tank Dishwasher Kitchen Bay Sink, # of bays (Comm) Ushwasher Commercial Urinal, Tank Wash Sink Urinal, Tank Wash Sink Urinal, Tank Wash Sink Water Closet, Flushvalve Dishwasher, Commercial Spray Urinal, Tank Water Closet, Flushvalve Water Closet, Tank
Continuous Demand: Constant Water Demand other than from aboveGPM Explanation for need of this demand
Lawn Sprinkler Peak DemandGPM A DDI ICANIT'S SIGNATURE
APPLICANT'S SIGNATURE DATE



City of Bloomington 494 Utilities Commercial Customer Contract



Please type or print full legal entity name:

Corporate Name:		
Name most commonly known as (if applicable):		
Service Address:		
Mail Attention:		
Mailing Address:		
Date of Incorporation (Day-Month-Year):	State of Incorporation:	
Federal ID #:	Business Phone #:	
Contact Person:	Contact Phone #:	
I am the Property Owner [] Tenant [] Other [] (explain):		
Name of Property Owner:	Owner's Phone #:	
Requested Date of Change:	Customer Acct. #:	
I am a new customer to City of Bloomington Utilities: Yes []	No []	
In the event of an emergency concerning your water and/or wastewater service, please provide us with the following emergency contact information:		
Name:	Telephone:	
I hereby contract with City of Bloomington Utilities (CBU) for service and agree to pay CBU for such services in accordance with its established rates. I also agree to conform to all CBU Rules, Regulations, and Standards and applicable Indiana law, governing the use of water, wastewater, and stormwater, now in force or which may hereafter by adopted.		
Signature:	Date:	
Title of individual signing for business or organization:		