

# PERMIT APPLICATION

## Star Sewer & Water District

10831 W. State Street ★ P.O. Box 400 ★ Star, Idaho 83669  
(208) 286-7388 ★ Fax (208) 286-7361

PERMIT NO.
<b>21-</b>
DATE OF CONNECTION

APPLICANT COMPLETE THIS SECTION IN ITS ENTIRETY					
TYPE OF PERMIT:	SERVICE ADDRESS (Street)			DATE OF APPLICATION	
<b>WATER</b> <input type="checkbox"/>	SUBDIVISION NAME			LOT #	BLK #
<b>SEWER</b> <input type="checkbox"/>					
TYPE OF CONSTRUCTION					
SINGLE FAMILY <input type="checkbox"/>	MULTI-FAMILY (No. of Units) <input type="checkbox"/>	COMMERCIAL (Specify Type of Business) <input type="checkbox"/>	NAME OF BUSINESS		
OWNER INFORMATION					
NAME			BUSINESS NAME		
MAILING ADDRESS		CITY	STATE	ZIP	
DAYTIME PHONE			OTHER PHONE (Specify)		

### PERMIT REQUIREMENTS - READ CAREFULLY PRIOR TO SIGNING!

I (We) hereby apply for permission to connect to the Star Sewer and Water District system as provided by the District's rules and regulations.

I (We) agree to notify the Star Sewer and Water District when my (our) tap has been completed and the line laid and before covering so they may inspect\* the same.

I (We) agree to keep adequate barricades and lights at nighttime around open trenches to comply with public safety standards.

I (We) understand that I will be responsible to the Star Sewer and Water District for any damages from the construction of this tapping operation.

I (We) understand that the monthly billing will start on the anticipated construction date. If no anticipated construction date is listed, billing will start within 30 days of the permit purchase date.

I (We) understand that when connecting to the water and sewer systems the legal property owner is responsible for connections from the back side of the water meter and sewer main lines including the tap. We recommend checking all connections prior to covering with dirt.

**AS THE PERMIT APPLICANT, YOU ARE RESPONSIBLE FOR THIS PERMIT AND CONNECTION TO THE DISTRICT'S SYSTEM AT THE ABOVE ADDRESS. PLEASE NOTE THAT ONLY DISTRICT PERSONNEL ARE AUTHORIZED TO TURN ON THE METER. TAMPERING WITH THE DISTRICT WATER SYSTEM WILL RESULT IN A \$1,000.00 TAMPERING FINE LEVIED TO THE HOLDER OF THIS PERMIT.**

I (WE) FURTHER UNDERSTAND THAT FEES PAID FOR THIS PERMIT ARE NON-REFUNDABLE AND NON-TRANSFERABLE. A FEE OF \$500.00 WILL BE CHARGED FOR ANY CHANGES TO THIS PERMIT ONCE ISSUED.

**THIS PERMIT CANNOT BE USED FOR IRRIGATION PURPOSES.**

**Anticipated Construction Date** \_\_\_\_\_ **Applicant Signature** \_\_\_\_\_

DO NOT WRITE IN THIS SPACE					
Water Connection Fee Amt. Paid	Water Meter Lease Fee Amt. Paid	Sewer Connection Fee Amt Paid			
<b>\$1,000.00</b>	<b>\$650.00</b>	<b>\$3,500.00</b>			
PAYMENT TYPE					
CHECK <input type="checkbox"/>	CK. NO.	TOTAL PAID	DATE PAID	TIME PAID	APPROVED BY (Dist. Rep.)
		<b>\$5,150.00</b>			

NOT VALID WITHOUT ORIGINAL DISTRICT STAFF SIGNATURE OR INITIALS

