



Lehigh County Authority

1053 Spruce Road; P.O. Box 3348; Allentown, PA 18106-0210
610-398-1444 Customer Service

Application For Water Service

Application Date

The undersigned hereby applies for water service for the premises indicated below, and agrees to be bound by the Rules and Regulations for Water Service (available from LCA) and all other applicable policies, and by the rates and fees of Lehigh County Authority. The application shall be cosigned: (1) by the spouse, when the application is made by husband and wife, (2) by a co-owner, when the property is owned by more than one individual, and/or (3) by the owner of the property, when the applicant is a tenant. In the case of a tenant/owner application, the owner agrees to accept responsibility for the payment of any and all bills for service, in the event such bill are not paid by their due date. NOTE: A property containing both residential and non-residential uses should be considered a commercial property.

X To Be Completed By Applicant Sewer Allocation Number:

Customer classification: Residential Commercial Industrial Institutional

Applicant Name _____ (Signature) _____ (Printed Name)

Premises: Property PIN Number: Phone Number:

Bills Should Be Sent To: (Address, if different from premises)

Applicant Is: (Check One) Owner Tenant

IF THE APPLICANT IS A TENANT, THE PROPERTY OWNER MUST COMPLETE AND SIGN THE FOLLOWING:

Owner's Name: Phone No:

Mailing Address:

Signature: _____ Printed Name: _____

X To Be Completed By Residential Applicant

Type of Structure: (Check One) Mobile Home Twin Single Family Townhouse Apartment

House Model: _____ Residential Sprinkler System required? Yes No

Note: Plumbing and Fire Protection System plans must be submitted and approved by LCA prior to the installation of equipment and piping.

Number of units to be served by water meter? _____

X To Be Completed By Commercial, Industrial or Institutional Applicant

Type of Business

Average Consumption: gallons per day Building Square Footage: _____

Maximum Rate of Flow: gallons per minute (non-fire)

Will a fire protection system be installed? (Check One) Yes No

Note: Plumbing and Fire Protection System plans must be submitted and approved by LCA prior to the installation of equipment and piping.

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| | Size | Amount | Date Paid |
|--|----------------------|----------------------|----------------------|
| Meter (Pit? Circle: Yes No) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Distribution Fee: (Circle: Type 1 Type 2) | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Capacity Tapping Fee | <input type="text"/> | <input type="text"/> | <input type="text"/> |

LCA Construction Permit (Check One) Applicable Non-Applicable.

Approved: LCA Restoration Deposit: _____ LCA Inspection Deposit: _____ **WWALLOC:**