

PERMIT APPLICATION FOR SEWER SERVICES

NAME: _____ PHONE NUMBER _____

MAILING ADDRESS: _____

CITY, STATE & ZIP _____

SERVICE ADDRESS _____

SOCIAL SECURITY # _____ LICENSE # _____

IF PROPERTY SERVICE IS RENTED, PLEASE PROVIDE THE FOLLOWING;

LANDLORD/PROPERTY OWNER _____

MAILING ADDRESS _____

CITY, STATE & ZIP _____

PHONE NUMBER _____

READ AND SIGN

In consideration of the granting of this permit, applicant (undersigned) agrees to accept and abide by all regulations of the District, and of all other pertinent ordinances or regulations that may be adopted by the district. Applicant also agrees to maintain the building sewer at no expense to the district. Applicant also agrees to notify the Sewer District office to request and inspection of the sewerage connection into the District's sewer line and prior to covering work. Please give a 24 hour notice!

All taps will be required to be performed by a licensed plumber at the customer's expense. Licensed plumber must provide a certificate of insurance and name Iberia Parish Sewer District as the certificate holder.

Applicant, land owner, tenant or contractor agrees to pay Sewer District for all sewerage user fees provided on the premises at the above service address, in accordance with the applicable rates. Iberia Parish Sewerage District user fees are billed through your water company.

SIGNATURE _____ DATE _____

PRINT NAME _____

SEWER USER FEE RATES

_____ RESIDENTIAL - \$34.00 FOR FIRST 2000 GALLONS THEN \$8.00 PER 1000 GALLONS THEREAFTER
BASED ON 80 % OF REMAINING WATER USAGE.

_____ COMMERCIAL - \$40.00 FOR THE FIRST 2000 GALLONS THEN \$10.00 PER 1000 GALLONS THEREAFTER
BASED ON 80 % OF REMAINING WATER USAGE.

_____ PORT OF IBERIA COMMERCIAL USERS - \$75.00 MONTHLY FOR THE FIRST 10,000 GALLONS OF WATER USED
THEN \$2.00 PER 1000 GALLONS THEREAFTER.

TO BE FILLED OUT BY OFFICE PERSONNEL ONLY

IPG PERMIT # _____

RED TAG # _____

GREEN TAG # _____

PERMIT ISSUED BY _____

PERMIT FEES \$ _____

RESIDENTIAL _____

COMMERCIAL _____

NEW CONSTRUCTION _____

DATE _____

REFUNDABLE DEPOSIT \$ _____

SEWER CONNECTION INSPECTED AND APPROVED ON ____/____/____

SIGNED BY _____