



BASTROP COUNTY WATER CONTROL AND IMPROVEMENT DISTRICT #2

Date Received: _____ Application No.: _____

APPLICATION FOR SANITARY SEWER SERVICE

Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone Number: Home: _____ Work: _____

Physical Address: _____

Residential: _____ Unit: _____ Block: _____ Lot: _____

Date Installed: _____ Date Inspected: _____

ALL MATERIAL AND INSTALLATION WILL BE
DONE BY THE DISTRICT OR THEIR REPRESENTATIVES.

Enclosed is a check for \$7,500.00 for payment in full for connection, installation and maintenance of the wastewater collection system and abandonment of the existing septic tank.

I understand that once the wastewater service is available, I will be required to connect to the District wastewater treatment system, disconnect from and properly abandon any septic tank pursuant to 30 Texas Administrative Code, Chapter 285.36, pay the monthly service charge to the District for wastewater treatment service and that said wastewater treatment service shall be provided subject to the Rules and Regulations of the District and all other applicable governmental entities. Monthly fees are charged per living unit. Non-payment of wastewater service fees will result in termination of water service.

Signed this the _____ day of _____, 200__.

Signature: _____

Printed Name: _____

P.O. BOX 708. BASTROP, TEXAS 78602-0708. FAX (512) 321-1692. PH. (512) 321-1688