est. 1895 Utilities Office

CITY OF GREENSBURg

**NEW CONSTRUCTION APPLICATION**

TODAY’S DATE: Click or tap here to enter text.

OWNER OF PROPERTY: Click or tap here to enter text.

OWNER’S STREET ADDRESS: Click or tap here to enter text.

OWNER’S CITY, STATE & ZIP CODE: Click or tap here to enter text.

DAYTIME TELEPHONE NUMBER: Click or tap here to enter text.

BILLING NAME (IF DIFFERENT): Click or tap here to enter text.

BILLING STREET ADDRESS (IF DIFFERENT): Click or tap here to enter text.

BILLING CITY, STATE & ZIP: Click or tap here to enter text.

CONSTRUCTION SITE ADDRESS: Click or tap here to enter text.

CONSTRUCTION COMPANY NAME: Click or tap here to enter text.

CONSTRUCTION COMPANY ADDRESS: Click or tap here to enter text.

CONTACT PERSON’S NAME: Click or tap here to enter text.

CONTACT’S DAYTIME TELEPHONE NUMBER: Click or tap here to enter text.

CHECK WHICH ONE APPLIES:

[ ] SINGLE DWELLING [ ] MULTI-DWELLING

CHECK WHICH ONE APPLIES:

[ ] RESIDENTIAL [ ] COMMERCIAL [ ] INDUSTRIAL

IF IT IS COMMERCIAL OR INDUSTRIAL WHAT TYPE OF BUSINESS IS IT: Click or tap here to enter text.

METER SIZE: Click or tap here to enter text.

UPON TYPING MY NAME IN THE SIGNATURE BOX BELOW:

I CERTIFY THAT ALL OF THE INFORMATION I HAVE COMPLETED ABOVE IS CORRECT AND ACCURATE. I ALSO UNDERSTAND THAT UNTIL I AM CONTACTED BY A REPRESENTATIVE OF THE MUNICIPAL WATER AND WASTEWATER OFFICE OF THE CITY OF GREENSBURG, INDIANA I HAVE NOT FORMALLY APPLIED OR MY APPLICATION IS ACCEPTED.

APPLICANT’S SIGNATURE: Click or tap here to enter text.

EMAIL ADDRESS: Click or tap here to enter text.

Manager/Controller

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