



## Derry Township Municipal Authority APPLICATION FOR SEWAGE SERVICE

Date \_\_\_\_\_

Subject always to the established rates, rules and regulations and any changes or amendments hereafter made I, the undersigned (Owner/Tenant) of the property at \_\_\_\_\_ make application for sewage service at said premises with service to begin \_\_\_\_\_ and to continue until cancelled by at least ten days written notice. If I sublet, I will be responsible for any sewer charges left unpaid by tenants of the property listed above.

Accepted:

**Derry Township Municipal Authority**

5760 Rt. 982

P. O. Box 250

New Derry, PA 15671

\_\_\_\_\_ Owner

\_\_\_\_\_ Tenant

Mailing

Address: \_\_\_\_\_

Phone: \_\_\_\_\_