



1201 N Townline Road  
LaGrange, IN 46761  
PH: (260)463-3241  
Fax: (260)463-8732

**Sewer Tap \_\_\_\_\_ Water Tap \_\_\_\_\_**

Requested by: \_\_\_\_\_

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

Responsible party contact # \_\_\_\_\_

**This permit is effective for thirty (30) days from the date of issue. I do hereby agree to be responsible for any and all liability resulting from the installation of the water/sewer line from my place of business or residence to the town water or sewer gravity main. Any other tap methods must be approved by the Water or Sewer Superintendent.**

\_\_\_\_\_  
Signature of Responsible Party                      Date

Permit issued by: \_\_\_\_\_

Date issued: \_\_\_\_\_

Fee: \_\_\_\_\_ Receipt # \_\_\_\_\_

**I have read and fully understand the "Sewer Tap Permit Requirements –Residential" sheet.**

\_\_\_\_\_  
Signature    Date

Inspected by: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_