

TOWNSHIP OF WASHINGTON
County of Macomb
WATER AND SEWER DEPARTMENT
11233 30 Mile Rd
Washington, MI 48095
Phone: 586-752-9740 Fax: 586-752-6463

Date: _____

WATER & SEWER SERVICE APPLICATION

PROJECT ADDRESS: _____

SUBDIVISION: _____ LOT # _____

PARCEL I.D. # _____ LOT/PARCEL SIZE: _____

ZONING USE

- SINGLE FAMILY RESIDENTIAL
- MULTIPLE FAMILY RESIDENTIAL
- COMMERCIAL
- INDUSTRIAL
- OTHER

WATER & SEWER REQUIREMENTS

- ENGINEERING
- GRADE
- SEWER
- SIDEWALK
- STORM
- SUMP LEAD
- WATER
- STREET TREES
- OTHER

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APPLICANT INFORMATION

Name: _____

Home Address: _____

Business Address: _____

Office Phone: _____ Other Phone: _____ Fax#: _____

APPLICANT (PRINT): _____

Signature of Applicant _____ Date: _____

**A site plan, specifications and plans drawn to scale must be filed with this application.
All easements must be shown on the site plan.**