

City of McLendon-Chisholm 1371 West FM 550, McLendon-Chisholm, TX 75032 972-524-2077; fax 972-524-9128

Application for Sanitary Sewer (Waste) Services

Connection	Disconnection	Update Account
EFF	FECTIVE DATE:	
Property Owner Name:		<u> </u>
Street Address:		, McLendon-Chisholm, Texas 7503
Mailing Address (if different):		Home Phone:
Work Phone:	Other:	Email Address:
Driver's License Number/State:		Date of Birth:
Forward or Billing Information	n	
Name:	T	Title
Address:		
• RESIDENTS: \$135 Do	Sewer Tap Fee due prior to issue eposit is due upon closing. Ma Inframark 9550 Helms Trail, Suite Forney, TX 75126.	ance of Building Permit. il application and check to:
CORRECT AND HEREBY AGRE WITH ALL PROVISIONS OF T	E THAT IF THE SERVICES HE CITY OF McLENDON-C ITY FOR PAYMENT FOR AL	ARE CONNECTED, I WILL COMPLY HISHOLM AND APPLICABLE STATE L FEES OR CHARGES AND ANY CIVIL
Applicant's Signature		Date Submitted