

TOWN OF TELlico PLAINS UTILITY EXISTING SERVICES APPLICATION

405 Veterans Memorial Drive, Tellico Plains, TN 37385
(423) 253-2333 FAX (423) 253-3673

Customer Name: _____

Physical Address: _____

Mailing Address (if different from physical): _____

Phone Number: _____ E-Mail Address: _____

Employer: _____

Connection Date Requested: _____

Specific Instructions/Information: _____

Customer grants the Town of Tellico Plains an easement ten (10) feet wide and lying five (5) feet on either side of the actual installed line for ingress & egress. This easement shall run with the land. The applicant agrees to permit authorized agents of the Utility free access to the premises of the customer for the purpose of inspecting, reading, repairing or removing property of the Utility. I also agree to allow these same individuals to inspect my plumbing and premises in order to secure compliance with the rules and regulation of the Water Department and the State of Tennessee.

The Town of Tellico Plains shall have the right, but shall not be obligated, to inspect any installation before the town's service is introduced, or at any later time, and reserves the right to reject any service not in accordance with town's standards; but such inspection, or failure to inspect or reject, shall not be regarded as an insurance against defects in the installation, or from violation of the Town of Tellico Plains Rules and Regulations, or from accidents which may occur upon customers premises.

The applicant agrees that this application is subject to the Town of Tellico Plains Rules and Regulations, a copy of which is open for inspection at the office of the town, and that these Rules and Regulations are a part of this agreement and incorporated herein by reference.

The applicant agrees to pay a **non-refundable** connection fee of \$100.00. Should default occur, I agree to pay a late charge (penalty) of one and one-half percent (1.5%) per month on the unpaid balance. I further agree should this account be placed for collection, I agree to pay all collection charges, including, but not limited to, prejudgment interest, court costs, attorney fees, and all other costs associated with collection.

Please complete this application for service and sign below. We also need a copy of your state or federal photo I.D. If you are the property owner, you will need to provide a copy of your deed showing proof of ownership. If you are renting this property, you will need to provide a rental agreement between the property owner and yourself.

Applicant Signature: _____ Date: _____

Printed Name: _____

Co-Applicant Signature: _____ Date: _____

Printed Name: _____

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CUT OFF POLICY

Every customer is responsible for paying their bill in a timely manner. In the event of an emergency situation, other arrangements **may** be made, **in writing**, with the town. Bills are due on the 15th of each month and any bill unpaid by the 15th include a penalty. You will have a 10 day "grace" period in which to pay your bill. **After the 25th, your services will be disconnected.** There will be no reminders sent out. To have your services reinstated, you will need to pay the balance due, along with a \$75.00 reconnect fee. If payment is received by the water department **before** 3:00 p.m., water service will be reconnected on that same day. If payment is received **after** 3:00 p.m., water service will not be restored until the following business day. In the event it becomes necessary for a water department employee to do an emergency reconnect after hours, there will be a **\$125.00 reconnect fee** charged to your account.

NOTICE: Tampering with a water meter or installing a bypass is a criminal act and will be prosecuted!

We have several ways you can pay your bill:

1. Bank draft at no charge to you
2. Online - <https://townoftellicoplains.qpaybill.com>
3. Pay by phone: (833) 686-0612
4. Pay at our office - we accept cash or check
5. Pay at Peoples Bank or Volunteer Federal (if bill is late, they will not accept your payment)

By signing below, I agree to all the terms of the Town of Tellico Plains **CUT OFF POLICY**.

Applicant's Signature _____

on this _____ day of _____, 20_____

Printed name _____

Co-Applicant's Signature (if applicable) _____

on this _____ day of _____, 20_____

Printed name _____

**TOWN OF TELlico PLAINS UTILITY
CROSS CONNECTIONS AGREEMENT**

**405 Veterans Memorial Dr.
Tellico Plains, TN 37385
PHONE: 423-253-2333
FAX: 423-253-3673**

Pursuant to the rules and regulations of the Town of Tellico Plains Water Department and the State of Tennessee cross-connection control program, a private well or auxiliary water source may not be connected, in any manner, to the public water supply, unless it is protected by a Reduced Pressure Back-flow Preventor(s) or approved air gaps in order to protect the town's water supply. These devices must be approved by the town's water department, in writing, prior to installation. The Town of Tellico Plains Water Department will have the right to inspect the installation and give final approval before any water is cross-connected. Non-Compliance will cause service to be immediately disconnected without further notice.

CHECK THE APPROPRIATE BOX

_____ This serves as notification that a well or spring **IS** located on the property at the following address:

_____ This serves as notification that a well or spring **IS NOT** located on the property at the following address:

I/We understand and agree that any well or other water source shall remain totally segregated from the public water supply and no unapproved or unauthorized cross-connections, auxiliary intakes, bypasses, or interconnections will not be permitted without the written approval of the Tellico Plains Water Department and only after a final inspection.

I/We further understand and agree that should this applicant desire to cross-connect a well, etc. with the public system, they will fully comply with this agreement. Failure to comply will cause the water to be terminated until the system is corrected. In the event any damage occurs, the undersigned agrees to hold the Town of Tellico Plains harmless for any liability, including any and all attorney fees.

Applicant's Signature _____

on this _____ day of _____, 20_____

Printed name _____

Co-Applicant's Signature (if applicable) _____

on this _____ day of _____, 20_____

Printed name _____

Physical Address:

_____, _____, _____, _____
Street/Road City/Town State Zip