



# City of Maple Ridge

## Engineering Department

Address: 11995 Haney Place, Maple Ridge BC V2X 6A9 Phone: 604-467-7339 Fax: 604-467-7461 email: engineering@mapleridge.ca

### APPLICATION FOR WATER SERVICE ESTIMATE

CIVIC ADDRESS OF PROPERTY		LEGAL ADDRESS OF PROPERTY (LOT AND PLAN NUMBERS)	
APPLICANT (PROPERTY OWNER)			
ADDRESS		DATE OF APPLICATION	
POSTAL CODE	PHONE	EMAIL/FAX	

PLEASE FILL IN OR CHECK APPROPRIATE BOXES	PIPE SIZE (mm)	NEW BLDG	EXISTING BLDG	SINGLE FAMILY	MULTI FAMILY	COMMERCIAL	LOCATION STAKED	ESTIMATES OFFICE USE ONLY
WATER CONNECTION								\$
PERMANENT DISCONNECT								
TEMPORARY DISCONNECT								\$
METER BOX REQUIRED								\$
OTHER						SUB-TOTAL		\$
<input type="checkbox"/> REQUEST WATER METER ON EXISTING SERVICE CONNECTION						GST		\$
						TOTAL ESTIMATE		\$

**TERMS AND CONDITIONS:**

I agree that I will comply with all City of Maple Ridge by-laws, including the following: streets and traffic, sediment control, water, Maple Ridge sanitary sewer regulations by-law, Maple Ridge storm drainage system extension regulations by-law and Greater Vancouver Sewerage and Drainage District sewer use by-law and amendments thereto in so far as they apply to my requirements and use. I also agree to save the City, its elected and appointed officials, employees and agents harmless from and against all liability, actions, causes of action, claims damages, expenses, costs, debts, demands or losses suffered or incurred by them or any of them, including consequential damages and damages to third parties whether known or unknown, foreseeable or not, arising from the installation and use of the service connection. The municipality reserves the right to charge the applicant for any additional costs incurred due to problems encountered, which at the time of the estimate were not known by the City. Payment of the connection fee must be made two (2) weeks prior to installation. Please make cheques payable to the City of Maple Ridge.

\*\*A stake must be placed and marked with paint where the service is required.

**Note:** THIS APPLICATION FOR A SERVICE ESTIMATE IS VALID FOR ONE HUNDRED EIGHTY DAYS (180 DAYS/6 MONTHS) FROM DATE OF ESTIMATE.

OWNERS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_