

South Island Public Service District

P. O. Box 5148

Hilton Head Island, SC 29938

(843) 785-6224

admin@sipsd.com

Owner Application for Sewer Service

As owner, I hereby make application for sewer service to the property listed below. I agree to comply with the following rules and regulations:

1. Sewer service will be requested at least three (3) weeks prior to the need for service.
2. When it is time to connect to the sewer lateral, call SIPSD's inspection department at (843) 785-6224 and request the location of the sewer lateral. Sewer pipe used from the building to the service connection at the street shall be 4" minimum SDR-35, conforming to ASTM-D-3034. A clean out must be installed at the service connection. PVC-ASTM-D2729 sewer pipe will NOT be accepted. When the sewer connection is completed, call the number mentioned above to arrange inspection. A 24-hour notice will be required. **A \$75 fee will be added to the account for sewer tap inspection. DO NOT BACKFILL UNTIL THE TAP HAS BEEN INSPECTED BY THE DISTRICT.** If SIPSD is not notified requesting an inspection and the sewer pipe is buried, it will be necessary for the contractor to uncover the pipe for this inspection. **For each failed inspection, a \$75 revisit fee will be added to the account.**
3. Any damages to the District's sewer system, water system, water meter, or laterals during the construction period will be repaired by the District and the cost of repairs will be paid by the applicant upon receipt of an invoice from South Island Public Service District.
4. It is the responsibility of the applicant to keep the water meter accessible for reading. Any covering by soil, building material, debris, etc. shall be removed by the applicant.

I have read, understand, and agree to comply with the rules and regulations as set forth in this application. This application constitutes a contract between the applicant and the District. Failure of the applicant to comply with these rules and regulations will result in termination of service to the applicant.

Owner's Information

Contractor's Information

Name: _____ Name: _____

Mailing Address: _____
Mailing Address: _____

Phone Number: _____ Phone Number: _____

Property Service Address: _____

Date Tap Completed: _____

Signature of Applicant: _____ Date: _____

Attached is the amount of \$ _____ in payment for the sewer tap fee.