

**EPHRATA AREA JOINT AUTHORITY**  
**RESIDENTIAL APPLICATION FOR WATER PERMIT**

(Single Family Dwelling)  
717-738-9202

Service Address: \_\_\_\_\_

Lot Number: \_\_\_\_\_ Development: \_\_\_\_\_

**Municipality:**

- Ephrata Borough
- Clay Township
- Ephrata Township

**Owners Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

**Render Bills to** (during construction):

- Owner
- Builder

**Builder:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

Is a new connection to the main required?

- Yes
- No

**Plumber:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

Will the wall of the structure be located 100 feet or more from the street line?

- Yes
- No

**FIRE SERVICE (if required)**

Requested Fire Service Size \_\_\_\_\_ Requested Fire Meter Size \_\_\_\_\_

I hereby make application for a service connection to the water distribution system of the Ephrata Area Joint Authority. The connection is requested to provide service to the property described above. I fully understand and agree to adhere to all terms and conditions of the Ephrata Area Joint Authority's current Rules and Regulations.

\_\_\_\_\_  
Owner/Builder Signature

\_\_\_\_\_  
Date

Notes:

- 1. Please allow 5-7 business days for permits to be processed and issued.
- 2. All water fees are due when the permit is picked up.
- 3. A copy of the permit will be provided when fees are paid.

Return form by: 1. Fax – 717-733-4062 2. Mail – 124 S State St Ephrata PA 17522 3. E-mail – <a href="mailto:nharris@ephrataboro.org">nharris@ephrataboro.org</a> or <a href="mailto:jwolfe@ephrataboro.org">jwolfe@ephrataboro.org</a> 4. In person – 8am -5pm weekdays
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