

**MALLORY VALLEY UTILITY DISTRICT
P.O. BOX 936
FRANKLIN, TN 37065-0936**

APPLICATION FOR COMMERCIAL WATER SERVICE

1. Name of Business: _____
2. Address of Business: _____
City/State/Zip _____
3. Size of Tap/Meter Desired: Domestic _____ Fire Protection _____
Irrigation _____
4. Will a public Fire Hydrant be installed? _____
5. Building to be used by: Owner _____ Tenants _____
Maximum Number of Tenants: _____
6. Building is to be constructed by: _____
Address: _____ City/State/Zip _____

Contact Person/Phone: _____
7. Person responsible for Water Bill during Construction: _____
Address: _____ City/State/Zip _____

Phone: _____

PLEASE BE ADVISED THAT IT IS THE RESPONSIBILITY OF THE CONTRACTOR OR OWNER TO NOTIFY MALLORY VALLEY UTILITY DISTRICT OF ANY CHANGES TO THE BILLING INFORMATION ON THE ACCOUNT. THE PERSON THAT IS RESPONSIBLE FOR THE WATER BILLS DURING CONSTRUCTION (AS LISTED IN #7 ABOVE) WILL BE LIABLE FOR ALL PAYMENTS UNTIL SUCH TIME AS THE DISTRICT IS NOTIFIED TO CHANGE THE BILLING INFORMATION OVER TO THE OWNER'S NAME.

The following information is needed to access the full impact of your business structure on the system. This information will be used to determine the size of tap needed and the amount of the tap fee.

8. Type of Building to be constructed: _____
9. Use of Building being constructed: _____
(Office, Warehouse, Restaurant, Bank, Hotel, etc.)
10. If Food Service, Church or Theater, Maximum number of seats: _____
11. If Car Wash, Maximum number of bays: _____
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12. If Hotel, Motel, Number of rooms, Number of suites w/ kitchenette _____

If banquet room, lounge, meeting room, etc. _____
13. If restaurant, Number of SEATS _____ and Number of EMPLOYEES _____ PER DAY
14. Total Square Footage of Building: _____

15. If multi-purpose building, square footage of each use: Use Square Footage

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16. Maximum number of employees: _____

17. Estimated number of customers/members: _____

18. Type and number of water use fixtures in building:

| | | | |
|---|--------------------------|--|--|
| Water Closets: _____/Tank Type _____/With Flush Valve _____ | | | |
| Urinals: _____ | Bath Tubs: _____ | | |
| Lavatories: _____ | Kitchen Sinks: _____ | | |
| Water Fountains: _____ | Garbage Disposals: _____ | | |
| Shower Heads: _____ | Dishwashers: _____ | | |
| Laundry Tubs/ Washing Machines _____ | Other: _____ | | |

***No additional fixture will be installed without written permission of Mallory Valley Utility District.**

19. Hours per day building will be in use: _____

20. Will a sprinkler system for fire protection be installed? _____
If yes, a sprinkler system information form must be filled out.

21. Will an irrigation system be installed? _____
If yes, area to be sprinkled: _____

Please provide the person responsible for Irrigation Water Bills after construction is completed:

Name: _____
Address: _____
Phone Number: _____

22. Approximate date water service is needed: _____

23. Comments or other useful information:

Please attach to this application the site, utility, water line, grading & drainage plans showing line size requested, pressure and flow required for domestic service, fire protection, and irrigation.

In consideration of the granting of water service, the undersigned agrees:

1. To accept and abide by all rules and regulations of the Mallory Valley Utility District and all other pertinent County, State and Federal regulations.
2. To notify Mallory Valley Utility District two (2) days prior to making the tap onto the water main so that the tap may be inspected.
3. To notify the Mallory Valley Utility District before any of the above statements, conditions, or fixtures are changed. Change may be prohibited or require purchase of additional tapping privileges.
4. The applicant understands that he will receive a monthly bill from Mallory Valley Utility District for water services furnished. A penalty provision of ten percent (10%) of the monthly charge applies to all bills paid after the due date of each month for which a bill has been rendered, and will give the District the right to collect such penalty. Failure to pay said bill will give the District the immediate right to discontinue water service.
5. Upon completion of this application, the owner is responsible for any water used pertaining to his property. This would include, but is not limited to, water used at the meter and any damage and/or water loss due to contractors damage of Mallory Valley water lines while doing grade work of any other type of work for the owner.

Signature of Owner _____ Date _____
(This application must be signed by the owner.)

Please Print Name: _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____ Email Address: _____

Application Approved/Date: _____ By: _____
For Mallory Valley Utility District