

**SEWER CONNECTION RESERVATION FORM
MOYOCK COMMONS SEWER DISTRICT**

Tax Parcel ID Number: _____

Service Address: _____

Name of Owner/Customer: _____

Billing Address: _____

Phone: _____ SSN/Federal Tax ID: _____

Name of Builder: _____

Builder's Address: _____

Phone: _____

Please provide information regarding the size and nature of the proposed business. If food service, include the size/number of seats. If retail or office, include the square footage of the proposed building and the type of business or produce.

Your application will be reviewed and any conditions noted below (pretreatment, etc.). Please notify the Sewer District Manager/Currituck County Water Department upon completion of construction to the system and BEFORE actually making the final connection to the system. The connection should be made under supervision of a representative of the Sewer District.

I hereby apply for a connection reservation as noted and agree to abide by the rules and regulations governing such reservation, receipt of which is hereby acknowledged.

Signature of Owner/Title Date: _____

DISTRICT USE ONLY:

Approved: _____ Date: _____

Conditions of connection: _____
