



Town of Hill, NH  
Hill Water Works  
30 Crescent Street, Ste #2  
Hill, NH 03243  
Phone (603) 934-3951  
Fax (603) 934-2011



## Application for Water Service

Property Owner: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C)

Email Address: \_\_\_\_\_

Location of Property  
to be Serviced: Map/Lot: \_\_\_\_\_

911 Street Address: \_\_\_\_\_

Type of Service: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Number of Units \_\_\_\_\_

A deposit for the estimated cost of the service connection and any attachment fees shown on the accompanying rate schedule will be required at the time of application. If additional costs are incurred, the customer will be billed accordingly. If the cost of the service connection is less than the deposit, the difference will be refunded to the customer.

Prior to service activation there shall be a final inspection by Hill Water Works.

Applicant Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Numbers: \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C)

Email Address: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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New Service Connection Fee (per rate schedule effective January 1, 2011)	\$1,500.00
Estimated cost for Excavation, Main tapping and Curb Stop Installation	\$
Total Deposit Required	\$

Deposit Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Water Commissioners  
 Approval \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_