



# CHARTER TOWNSHIP OF COMSTOCK

## SANITARY SEWER SERVICE CONNECTION APPLICATION

\_\_\_\_\_  
Service/Property Address

\_\_\_\_\_  
Parcel ID

\_\_\_\_\_  
Sewer Plan Sheet

\_\_\_\_\_  
Applicant's Name

\_\_\_\_\_  
Applicant's Address

\_\_\_\_\_  
Owner's Name (if not Applicant)

\_\_\_\_\_  
Owner's Address (if not same as above)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Installation Contractor

Application is hereby made for a sewer service connection at the property indicated above.

\*I understand that a connection fee, based on the User Unit Charge Schedule adopted by the Township Board, in addition to any Township assessments that may be due for this property, must be paid to the Township Treasurer prior to application approval.

\_\_\_\_\_  
**Application Accepted By**

\_\_\_\_\_  
**Signature of Applicant**

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

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

\*If an assessment is due, the Township will complete the following information:

**Assessment Amount:** \_\_\_\_\_

**Paid In Full**  **Contract**

**Payment/Contract Date:** \_\_\_\_\_

**Check #:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**NOTICE TO HOMEOWNER OR PLUMBER:**

**IT IS YOUR RESPONSIBILITY TO EXPOSE THE SANITARY SEWER LEAD AT THE PROPERTY LINE  
TO VERIFY DEPTH OF LEAD BEFORE STARTING SERVICE INSTALLATION**

**If the lead cannot be located, please contact the  
Charter Township of Comstock Office at (269) 381-2360**

**Copies to:** Applicant  
Township Treasurer (Original for file)  
Planning & Zoning Administrator (new construction only)  
Assessor

(Revised: 03/2020)

Office: 6138 King Hwy, Kalamazoo, MI 49048  
Mailing: P.O. Box 449, Comstock, MI 49041

Phone: 269-381-2360  
Fax: 269-381-4328