



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: 5858 King Hwy, Kalamazoo, MI 49048
Mailing: P.O. Box 449, Comstock, MI 49041

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