

**YORKTOWN WATER DEPARTMENT
1080 SPILLWAY ROAD
SHRUB OAK, NY 10588
TELEPHONE: (914) 245-6111 / FAX: (914) 245-8422**

PRE-WATER SERVICE APPLICATION*

DATE: _____

Applicant: _____

Address: _____

Telephone: _____ Email Address: _____

Job Location: SECTION _____ PARCEL _____ LOT _____

STREET _____

Meter Pit Required: Yes ___ No ___

(If line from curb box to house is 75 ft. or greater and/or a coupling meter pit is required (see attached meter pit fee schedule).)

Tap Size: _____

FOR OFFICE USE ONLY

1. Water District _____
(Check One: In District _____ Out of District _____)
2. Highway Dept. Street Opening Permit Required: Yes ___ No ___
(Contact Highway Dept. directly at 914-962-5781)
3. Meter Size: _____ (To be determined by Water Dept. authorized personnel)

Water Permit Fee (see attached fee schedule) _____.
(Includes inspection of service line & purchase/installation of up to 1" meter; applicant responsible for meters over 1")

Reviewed by: _____ Date: _____
(Authorized Personnel)

Approved by: _____ Date: _____
(Water Superintendent)

*After 6 months from date of approval this permit becomes invalid and must be re-evaluated by the Water Department staff. Prices are subject to change.

ALL WORK MUST BE PERFORMED BY A WESTCHESTER COUNTY LICENSED PLUMBER.