



City of Chicopee
Water Department
115 Baskin Drive
Chicopee, MA, 01020
Phone: 413-594-3420
Fax: 413-594-3461

Residential/Commercial
Water Service
Application Form
Rev. 8/16/2019

James Deni Jr.
Asst. Superintendent/Engineer

Applicant Information: _____ Print Name _____ _____ Company Name _____ _____ Office Phone Number _____ Cell Phone Number _____ _____ Billing Address _____ _____ City, State _____ Zip <i>If applicant is not owner, please submit Owner's Authorization Letter.</i>	Nature of Work: (Check All That Apply) <input type="checkbox"/> New Service <input type="checkbox"/> Replacement Service <input type="checkbox"/> Domestic Service <input type="checkbox"/> Fire Service Size of Water Service(s): <i>Applicant/Developer's design engineer to determine service size. New combined domestic and fire suppression services are not allowed. 3/4" Services are only allowed for repairs.</i> Domestic: <input type="checkbox"/> 1" <input type="checkbox"/> 1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8" <input type="checkbox"/> 10" <input type="checkbox"/> 12" Fire: <input type="checkbox"/> 1" <input type="checkbox"/> 1.5" <input type="checkbox"/> 2" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8" <input type="checkbox"/> 10" <input type="checkbox"/> 12" Services larger than 1" Contractor Must Receive Water Service Construction Checklist Upon Submittal of this Form.
Owner Information: <input type="checkbox"/> Check If Same as Above _____ Print Name _____ _____ Phone Number _____ _____ Billing Address _____ _____ City, State _____ Zip	Construction Work to Be Performed By: _____ Contractor Foreman Name _____ _____ Company Name _____ _____ Office Phone Number _____ Cell Phone Number _____ _____ Dig Safe Number _____ Date Notified <i>It is the responsibility of the service installer to secure all required Street Occupancy Permits via Engineering Dept. and follow <u>Water Service Construction Checklist</u> for Water Projects.</i>
Location of Work: _____ Address/Parcel Number _____	
<p><i>The undersigned hereby makes application for service from the Chicopee Water Department at the herein named premises. The undersigned will assume all expenses of the tap, pipe, and other appurtenances in accordance with the schedule of rates and charges as adopted by the Chicopee Board of Water Commissioners. Water use and supply are subject at all times to the rules and regulations established by the Chicopee Board of Water Commissioners.</i></p>	
_____ Applicant's Signature	_____ Date

Office Use Only	
Application Received By: _____	_____
Employee Name/Signature	Date