

Application for Water Connection



City Clerk's Office, 403 Third St, Ida Grove, Iowa 51445
712-364-2428 connect@idagroveia.com

Property Owner Information

Property Owner Name:		Application Date:	
Property Address:		Phone:	
		Secondary Phone:	
State/Zip:			
Email:			

Project Information

Person completing work:	
Address:	
Legal Description:	
Size of Service:	
General Use of Water:	

I acknowledge that I have read this application, and I agree to comply with all City Ordinances, State and Federal Laws regulating municipal water use and connection. I also further acknowledge my responsibility for this project until final approval by the City.

SIGNATURE OF APPLICANT	DATE
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For Office Use Only

Received By:		Date Filed:		Permit #	
Signature of City Clerk:		Approval Date:			
Signature of Water Superintendent		Approval Date:			