

**South Alburgh Fire District No. 2
Water Service Agreement**

Important: Please read the Terms & Conditions on Page 3 before completing this form. Terms and Conditions are provided for "Applicants in Proposed Phase 2" and for "All Applicants".

Owner Name: _____ Phone: _____
Co-Owner Name: _____ Phone: _____
Mailing Address: _____ Email**: _____
Property Location: _____ Parcel ID: _____

Contingent upon successful completion of the Steps put forth in the New Customer Service Connection Checklist and passing a final inspection by the District Water Superintendent (as evidenced by the Superintendent's signature on the completed New Customer Service Connection Checklist):

1. The Fire District agrees to connect the undersigned to the proposed water system for the following property and use:

A. Type of use

☐ Year-round Residential
☐ Seasonal Residential

☐ Commercial*
☐ Agricultural*

*Explain details _____

B. Number of Equivalent Residential Units (ERUs) _____
(An ERU is defined as a one household residential dwelling.)

2. The undersigned agrees to pay a one-time connection fee according to the schedule included in the attached Terms and Conditions, paragraphs C and J, based on the number of ERUs.
3. The undersigned acknowledges that he/she is responsible for water service charges established by the Prudential Committee.
4. **Inactive Account:** Check here if you do not need water at this time but will pay the connection fee to have an inactive account. You will not be charged for debt service until you have taken the proper steps to connect and are ready to use metered water.
5. This agreement is subject to the Terms and Conditions attached hereto.

SOUTH ALBURGH FIRE DISTRICT NO. 2 (SAFD2)

c/o Alburgh Village Office
1 North Main Street
Alburgh, Vermont 05440

Ph: (802) 796-3763 Fax: (802) 796-3939
safd2committee@gmail.com

WATER SERVICE ALLOCATION REQUEST

Owner Name: _____ Phone: _____

Co-Owner Name: _____ Phone: _____

Property Location: _____ Parcel ID: _____

Water Use in Gallons Per Day Expected: _____

I understand that this form is a request for allocation of water and will be reviewed by the South Alburgh Fire District No. 2 (SAFD2) before I proceed further with the connection process.

Upon receiving notification of approval from SAFD2 I may continue the process and advance to system design.

I further understand that if I do not carry out the steps as put forth in the Service Installation Checklist and connect to the main water line within 6 months from the date of approval (one year if new construction) that SAFD2 may rescind my approval and allocate the water to another party

Signature: _____ Date: _____

For SAFD2 Use Only

ERUs Approved: _____ Water Gallons Per Day Approved*: _____ Denied: _____
*450 gallons per day per ERU

Connection Fee: _____ Deposit Required: _____ Date Deposit Paid: _____

This allocation will be null and void if connection does not take place by: _____

If denied, reason for denial: _____

Signature: _____ Date: _____
Chairperson, SAFD2 Prudential Committee or Designee

**South Alburgh Fire District No. 2
Water Service Agreement**

We, the undersigned, agree to the content of this Agreement, the fees set forth, and the Terms and Conditions thereof.

SOUTH ALBURGH FIRE DISTRICT NO. 2

OWNER

By: _____
Duly Authorized Agent

Date: _____

Name

Signature

Date

Name (Co-owner)

Signature

Date

NOTICE: If property is owned by more than one person, all owners must sign. If property is owned by a partnership or corporation, the General Partner of the Corporation or CEO must sign. If property is owned by a trust, the signatory authority must sign.

PLEASE RETURN THIS FORM TO:

South Alburgh Fire District No. 2
1 North Main St, Suite 2
Alburgh, VT 05440

NOTICE: THIS IS A BINDING CONTRACT. YOUR SIGNATURE ON THIS AGREEMENT MEANS THAT YOU ARE LIABLE FOR PAYMENT OF ALL SUMS DUE UNDER THIS AGREEMENT.