
WATER OR SEWER TAP APPLICATION

- **Step 1.** Fill out this application and a City Right of Way (ROW) permit application to the best of your ability.
 - For any questions about the applications please call the Building Official at (307) 532-1856 or e-mail destes@torringtonwy.gov
- **Step 2.** Return completed applications to City Hall at 436 East 22nd Avenue or e-mail them directly to destes@torringtonwy.gov and sanaya@torringtonwy.gov
- **Step 3.** All Applications dropped off at City Hall will be forwarded to the Building Official.
- **Step 4.** The Building Official will forward your request to the Water/Sewer Department. They will contact the person listed as the Project Contact Person on page 1 of the application.
- **Step 5.** Water Department staff will meet with you and discuss your project and requirements where they will provide you with a written cost estimate of total fees for the work and a time schedule for the work to be completed.
- **Step 6.** Water Department staff will forward an approved work order with total fees back to the Building Official for final approval.
- **Step 7.** The Building Official will contact you and inform you that your final bill is ready at City Hall for payment. Once all of the fees are paid in full at City Hall you can proceed with the project while working in conjunction with the Water/Sewer Department and the Building Official.
- **Step 8.** If a work order is necessary, the Building Official will advise you to contact City Hall for further information.
- **Step 9.** The Building Official will e-mail the final approved Water & Sewer Tap and City Right of Way (ROW) permit applications to the Water/Sewer Department.



City of Torrington
 Engineering & Planning
 PO Box 250
 Torrington, WY 82240

City Engineer (307) 532-4815
 Building Official (307) 532-4213
 FAX (307) 532-2010
 www.torringtonwy.gov

Water & Sewer Tap Application		
Property Owners Name:	Date:	
Property Owners Address:		
City:	State:	Zip:
E-mail: <small>(Please Print)</small>	Phone: ()	
Owner Signature: <small>(Application shall be signed by the current property owner before any permit is approved)</small>		
Project Information (Please Print)		
Project Address:		Date:
Project Contact Person:		Phone: ()
Billing Address:		
City:	State:	Zip:
E-mail: <small>(If different from above)</small>		
Business Name/Contractor:		
Business Name:		
Address:		
City:	State:	Zip:
E-mail: <small>(Please Print)</small>		
Master of Record	City of Torrington Contractors License #	
Permit Number:		

Project Information

 New Construction

 Existing Structure with new taps required

Type of Tap: (Check all that apply)	Tap Size: (Check all that apply)	Remarks:
<input type="checkbox"/> Commercial	Water <input type="checkbox"/> 1" <input type="checkbox"/> 2" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8"	Type of Business _____
	Sewer <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8"	
<input type="checkbox"/> Residential	Water <input type="checkbox"/> 1" <input type="checkbox"/> 2" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8"	
	Sewer <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8"	
<input type="checkbox"/> Fire/Line extension/Hydrant	Water (State Size)	
<input type="checkbox"/> Irrigation	Water <input type="checkbox"/> 1" <input type="checkbox"/> 2" <input type="checkbox"/> 4" <input type="checkbox"/> 6" <input type="checkbox"/> 8"	
<input type="checkbox"/> Other (Please note in Remarks)	<input type="checkbox"/> Other (Please note in Remarks)	
<input type="checkbox"/> Customer Requests Cost Estimate Only	<input type="checkbox"/> Property address in City Limits	<input type="checkbox"/> Property address out of City Limits

Please read the following notes before signing this application:

- Tap fees must be paid and you must activate an account or add to an existing account with the Utility Billing Department before an approved work order is generated by the Building Official.
- These fees are estimated to the best of our ability. Applicants shall be responsible for all actual charges.
- City approved utility site plan required for all new commercial projects.

I have read and understand these items and terms: _____
(Applicant's Signature)

This permit becomes null and void if work or construction authorized is not commenced within 30 days, or if work is or construction is suspended or abandoned for a period of 3 days at any time after work is commenced. I hereby certify that I have read and examined this application and all information given is true and correct. All provisions of laws and ordinances governing this type of work shall be complied with whether specified herein or not. The granting of this permit does not presume or give authority to violate or cancel the provisions of any state or local laws regulating construction or the performance of construction.

Tap Fee – Water	\$ _____
Tap Fee – Sewer	\$ _____
Installation/Meter /ERT Fee	\$ _____
SDF Charge Water	\$ _____
SDF Charge Sewer	\$ _____
Other	\$ _____

Total Fees Due: Date Paid:
 \$ _____ _____

COT Approval _____ Date _____