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WILLIAM P. JENKINS

OPERATIONS MANAGER
ARTHUR W. MEADE

NEW CUSTOMER TAP FORM

ACCT # _____ WORK ORDER # _____

WATER CHARGES

- NEW CUSTOMER WATER SERVICE \$ 25.00
- WATER TAP FEE 5/8" OR 3/4" \$ 2,142.00
- WATER TAP FEE 1" \$ 2,387.00
- 1-1/2" METER \$ 4,567.00
- 2" AND LARGER METER \$ _____
(MATERIAL PLUS LABOR & OVERHEAD COST)

SEWER CHARGES

- NEW CUSTOMER SEWER SERVICE \$ 25.00
- SEWER TAP FEE \$ 400.00

WATER AND SEWER IMPACT FEES BASED ON SQUARE FOOTAGE		
SQUARE FOOTAGE	WATER	SEWER
2,000 OR LESS	\$ 3,414.00	\$ 4,632.00
2,001 TO 3,500	\$ 5,121.00	\$ 6,948.00
GREATER THAN 3,500	\$ 7,738.00	\$ 10,500.00

*FEES WILL BE LEVIED WHEN THE SYSTEM IS IMPACTED BY A CUSTOMER CONNECTING TO THE SYSTEM OR INCREASING THE SIZE OF THE RESIDENCE.

CHANGE METER SIZE

- 3/4" TO 1" METER \$ 957.00
- 1" TO 3/4" METER \$ 721.00

GRINDER PUMP ACCOUNT

- APPLICATION/ORIGINATION FEE \$ 100.00

WATER IMPACT FEE (SEE CHART) \$ _____

SEWER IMPACT FEE (SEE CHART) \$ _____

TOTAL FEES DUE \$ _____

FULL NAME _____

IOP SERVICE ADDRESS _____

BILLABLE ADDRESS _____

PRIMARY PHONE NO. (_____) _____ - _____ SECONDARY PHONE NO. (_____) _____ - _____

E-MAIL CONTACT(S) _____

BY SIGNING THIS APPLICATION FOR WATER AND/OR SEWER SERVICE, THE APPLICANT AGREES TO PAY ALL COSTS OF COLLECTION OF THE APPLICANT'S UNPAID BILLS. THE ISLE OF PALMS WATER AND SEWER COMMISSION HAS THE RIGHT PURSUANT TO THE SOUTH CAROLINA SETOFF DEBT COLLECTION ACT TO COLLECT ANY SUM DUE AND OWED BY THE APPLICANT THROUGH SETOFF OF THE APPLICANT'S STATE INCOME TAX REFUND. IF ISLE OF PALMS WATER AND SEWER COMMISSION CHOOSES TO PURSUE DEBTS OWED BY THE APPLICANT THROUGH THE SETOFF DEBT COLLECTION ACT, THE APPLICANT AGREES TO PAY ALL FEES AND COSTS INCURRED THROUGH THE SETOFF PROCESS, INCLUDING FEES CHARGED BY THE DEPARTMENT OF REVENUE, THE SOUTH CAROLINA ASSOCIATION OF COUNTIES, THE MUNICIPAL ASSOCIATION OF SOUTH CAROLINA, AND THE ISLE OF PALMS WATER AND SEWER COMMISSION. FURTHERMORE, I AGREE NOT TO ENCROACH UPON THE WATER METER(S) SERVING THIS PROPERTY WITH ANY TYPE OF PLANTINGS, BERMS OR STRUCTURES, NOR WILL I PLACE ANYTHING WITHIN THE RIGHT OF WAYS THAT WOULD IMPEDE MAINTENANCE OR ACCESS TO THE WATER METER(S) OR SERVICE LINE SERVING THEM. IF I FAIL TO COMPLY WITH THE FOREGOING, I WILL BE LIABLE TO THE ISLE OF PALMS WATER AND SEWER FOR ALL DAMAGES AND EXPENSES INCURRED.

FULL NAME _____

SIGNATURE _____ DATE ____ / ____ / ____

****ALL SEWER TAPS MUST BE INSPECTED BY A REPRESENTATIVE OF THE ISLE OF PALMS WATER AND SEWER COMMISSION DURING TAP IN. A 24-HOUR NOTICE IS REQUIRED FOR SEWER TAP INSPECTIONS. ****

OWNER/CONTRACTOR PRINTED NAME _____

OWNER/CONTRACTOR SIGNATURE _____ DATE ____ / ____ / ____

PLEASE RETURN THIS FORM WITH PAYMENT

1300 Palm Boulevard • Post Office Box 528 • Isle of Palms, South Carolina 29451

Telephone (843) 886-6148 Fax (843) 886-6894