APPLICATION FOR SEWER SERVICES
WEST WARREN - VIOLA UTILITY DISTRICT

We, the under signed, hereby apply for services from the WEST WARREN - VIOLA UTILITY DISTRICT at the property known as _____, located on _____, in Warren County, Tennessee.

<center>road or street</center>

APPLICANT AGREES TO:

1. Pay the applicable sewer tap fee:

     $ 750.00 per single household equivalency

2. Connect to the sewer system at the tap and install his own sewer service line from said tap to the facilities to be served.

3. Notify the district as to when he purposes to connect to the tap so that District presonnel can be present to inspect the connection.

4. Install a clean out at the point that he connects to the tap.

5. Promptly pay for services in accordance with the sewer rate schedule as adjusted periodically; but not less than a minimum monthly bill; at such time and place as the shall be determined by the District's governing body.

6. Begin paying for sewer services immediately after being notified that sewer services are available.

7. Applicant hereby grants to the District an easement to construct, operate, and maintain the sewer facilities on land owned by the applicant or any interest in land the applicant may own or have.

DISTRICT AGREES TO:

1. Furnish and install a sewer tap into the District's main line; and install a lateral, or point of connection at or near the applicant's property line, in accordance with sound engineering practices.

2. Operate and maintain the sewer system so as to provide sewer services to all customers in a safe, efficient and nondiscriminatory manner.

MUTUAL AGREEMENTS:

1. If the sewer tap is installed:
    A. Any loan obtained by the District to finance the sewer system will not be a lien on the applicant's property.

    B. If the sewer tap is not installed or for any reason it is not feasible to serve the applicant, the tap fee will be refunded to the applicant.

Signed: _____   Tap fee / Date _____
<center>Applicant</center>

_____
<center>Co-Applicant</center>   **WEST WARREN - VIOLA UTILITY DISTRICT**

Mailing Address: _____

_____   Signed _____

Social Security # _____   Date _____

Phone (   ) _____