



# DEPT OF UTILITIES WATER & SEWER PERMIT APPLICATION

3000 E 1<sup>st</sup> St, Fremont NE 68025

**402-727-2613 402-727-2675 Fax**

www.fremontne.gov

**Email Completed Form To - [watersystem@fremontne.gov](mailto:watersystem@fremontne.gov)**

**Date** \_\_\_\_\_

**WATER**

RESIDENTIAL

COMMERCIAL

**Address of Project:** \_\_\_\_\_

**Property Owner Name:** \_\_\_\_\_

New

Replace

Repair

**Water Tap Size:**  3/4"  1"  1 1/2"  2"  Other \_\_\_\_\_

**Water Meter Size:**  5/8"  1"  1 1/2"  2"  Other \_\_\_\_\_

**Service Pipe Size:** \_\_\_\_\_

**Fire Line:**  Yes  No **If yes, what size?:** \_\_\_\_\_

**Backflow:**  Yes  No

**Lawn Sprinkler:**  Yes  No

**SEWER**

RESIDENTIAL

COMMERCIAL

**Address of Project:** \_\_\_\_\_

**Property Owner Name:** \_\_\_\_\_

New

Replace

Repair

**Sewer Tap Size (4" min):** \_\_\_\_\_

**How Is Line Going To Be Repaired/Installed?** \_\_\_\_\_

**Line Size:** \_\_\_\_\_

**Material:** \_\_\_\_\_

**LICENSED PLUMBER** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Email** \_\_\_\_\_

As record title owner/owners of the above described premises, I/we hereby agree to abide by all the Rules, now in effect or to be enacted together with all the Laws, Rules, Regulations and Ordinances of the City of Fremont, now in effect or to be enacted and request a Sewer Permit to be granted.

**Applicant Name** (print clearly) \_\_\_\_\_

**Signature** \_\_\_\_\_

**\*\*Please attach copy of Plumbing License.\*\***

**Permit #:** \_\_\_\_\_

**Permit Fee:** \_\_\_\_\_