



CITY OF FRANKLIN, NEW HAMPSHIRE

Municipal Services Department

"The Three Rivers City"

43 West Bow Street
Franklin New Hampshire 03235

Tel: (603) 934-4103
Fax: (603) 934-7409
www.franklinnh.org

Water Connection Permit

No.: _____

Date: _____

Street Address for Proposed Project: _____

Franklin, NH 03235

Owners Name:				
Address (where owner resides):				
Telephone (Contact info):	Street Address (Home Phone)	City (Work Phone)	State (Cell Phone)	Zip Code (email)

Contractors Name:				
Contact Information:	(Home Phone)	(Work Phone)	(Cell Phone)	(email)

This certifies that the amount of \$ _____ has been received from the property owner identified above to connect to City Water at the property located above. Any additional costs of water connection, including tapping into the water main, will be borne by the customer and may be determined by contacting the Municipal Services Department at (603) 934-4103.

The Contractor is responsible to inform the Municipal Services Department within twenty-four (24) hours of when the work will be completed.

Customer's Name: _____

Date: _____

Municipal Services Signature: _____

Date: _____

City Clerk Signature: _____

Date: _____