



Amount Paid _____

Check # _____

Date _____

Office Use Only

Village of Birch Run
12060 Heath Street
PO Box 371

Birch Run, Michigan 48415

Ph # (989) 624-5711 Fax # (989) 624-9681

SEWER SERVICE CONNECTION APPLICATION

I am requesting a sewer connection to the Village of Birch Run Sewer System. I agree to abide by all rules and regulations of the Village of Birch Run Sewer System and to have all lines between the sewer main and the building inspected by a representative of the Village of Birch Run Sewer System before they are covered up.

(PLEASE PRINT)

Applicant Name: _____

Mailing Address: _____

Phone: _____ Alternate Phone: _____

Applicant Signature _____
(Date)

Connection Address: _____

Connection Fees: \$ _____

Received for the Village Sewer System by: _____

I certify that all lines and connections comply with the rules and regulations of the Village of Birch Run Sewer System.

Village of Birch Run Sewer Department: _____
(Date)

Connection Diagram