

**PENN TOWNSHIP
20 WAYNE AVENUE
HANOVER, PA 17331
717 632 7366 (telephone)
717 632 2464 (fax)**

**www.penntwp.com
Pennadmin@comcast.net**

**TRANSFER OF PROPERTY – APPLICATION FOR SANITARY SEWER SERVICE
(must be completed and returned within 10 days)**

Date of application: _____ **Date effective:** _____

Name of property owner: _____

Mailing address: _____

I, the undersigned, hereby apply to Penn Township for the service of sewer at the following properties:

Service addresses: _____

All billings and/or other correspondence for the above sewer service shall be mailed to the property owner at his/her address listed above. Tenants and/or renters can not make application for service.

Property shall be occupied by (circle one) owner tenant

In consideration of the granting of this application for the service of sewer, the undersigned agrees that the duly posted rates, rules and regulations of the Penn Township Code as from time to time amended, shall be a part of my contract with said sewer service, and I hereby agree to be bound thereby. It is also understood and agreed that representatives of the sewer department shall be permitted to enter the above premises at any reasonable time to inspect service pipes or fixtures.

(Signature of applicant)

(Printed name of applicant)

(Telephone number)

(E-mail address)

Application can be returned by U.S. mail, fax or e-mail.