



City of Goose Creek, SC Application for Water Service Tap

Name _____

Billing Address _____

Home Phone _____ Business Phone _____

Fed ID # or SS # _____

Property To Be Sold () Rented () Owner Occupied ()

Single Family () Duplex () Multi-Family () Business ()

Size of Tap Requested _____ Special Conditions _____

Legal Description Lot _____ Block _____ Development _____

TMS # _____

Subdivision _____ Phase _____

House Number _____ Street _____

Builder or Contractor
(if different than above) _____ Address _____

Phone _____

I (We) hereby certify that the information given in this application is true and correct. I am aware that I must comply with all ordinances and regulations of the City of Goose Creek, South Carolina, governing the availability and usage of The City of Goose Creek water system.

_____ Date _____ Signature of Applicant

Fees Due:

Tap Fee	Impact Fee	Deposit	Origination	Additional	TOTAL

Administrative Use Only - Approval

Approved / Disapproved: _____
Director of Public Works _____ Date _____

Approved / Disapproved: _____
City Administrator _____ Date _____

Comments: _____

Administrative Use Only - Processing

Date Processed _____ By _____ Amount _____

Comments: _____

Service Order # _____ **Route #** _____ **Account #** _____