



**TOWN OF MENDON  
WATER COMMISSION**

20 Main Street  
Mendon, Massachusetts 01756  
Phone: (508) 473-2547 Fax: (508) 478-8241  
Email: [watercom@mendonma.gov](mailto:watercom@mendonma.gov)  
DEP Public Water Supply (PWS) ID #217900  
[mendonma.gov/water](http://mendonma.gov/water)

**Mendon Water Commission - Request for New Service**

Date: \_\_\_\_\_ Property Address (Lot # & Street): \_\_\_\_\_

*Property Owner/Customer Info:*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

*Builder/Contractor Info (if applicable):*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Connection Size/Meter Size Requested: \_\_\_\_\_

**Connection Fees** (Rates set by Water Commission at their 2/23/17 meeting)

Existing Service - Restart	New Service – Residential	New Service – Commercial
\$50.00* Turn-on fee to restart service.	Residential Connections* *Customers with irrigation systems or wells may be assessed additional fees.	\$1 × Estimated Title V Flow Rate (gpd) + Actual Cost of new meter
*owners may be liable for cost of meter replacement	\$500 × # BR Minimum Fee: \$1,500	Flow Rate: _____ gpd
Total: \$ _____	#BR: _____ Total: \$ _____	Meter Cost: \$ _____ *Contact Dept. for estimate Total: \$ _____
-----Please select connection option-----		

Once approved by the Mendon Water Commission, this application shall establish a contract between the Town of Mendon and the applicant, obligating the applicant to pay all rates and fees set by the Commission as well as comply with Mendon's Rules and Regulations as may be amended by the Commission from time to time.

**Applicant (Property Owner)**

**Water Commission Approval**

\_\_\_\_\_  
*Name (Print)*

\_\_\_\_\_  
Allan Kent, Chairman

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

\_\_\_\_\_  
Kevin Rudden, Commissioner

\_\_\_\_\_  
Dean D'Alessandro, Commissioner

**OFFICE USE:** TOTAL \$ \_\_\_\_\_ CASH CHECK (# \_\_\_\_\_) Pd: \_\_\_\_\_