

Holly Hills Water and Sanitation District

405 Urban St, Suite 310, Lakewood CO 80228

720-213-6621

Arapahoe and Denver Counties

**Application for Sewer Service Line Repair
or Replacement Permit**

Date: _____

Homeowner Information:

Name		
Address		
City/State/Zip		
Phone		Email
	<input type="checkbox"/> I am the applicant	

Contractor Information:

Name		
Address		
City/State/Zip		
Phone		Email
	<input type="checkbox"/> I am the applicant	

<input type="checkbox"/> I have paid the \$150 permit fee

Please mail the check to: Holly Hills c/o Public Alliance, 405 Urban Street, Suite 310, Lakewood, CO 80228

<input type="checkbox"/> I have secured a \$10,000 license and permit bond, naming Holly Hills Water and Sanitation District as Obligee

Please attach a copy of the bond when submitting this form. [attach file]

IMPORTANT: It is the responsibility of the applicant to schedule an inspection by the District prior to completing the work. Failure to do so may result in the District excavating and inspecting the work at the cost of the homeowner.

Received by: _____

Date Received: _____