

12. If there is information about the water connection of a house closest to the place where the water connection is requested

Water Connection Account No :

Address :

13. Outline the route to the site with complete details required to easily locate the location where the water connection is required. (Attach another diagram if needed. If GPS coordinates can be recorded it will be easier in the future)

	To record GPS coordinates											
	(Read the Instructions on Obtaining Coordinates)											
	Latitude (N)						Longitudinal (E)					

14. If there is any other NWSDB water supply connections for any part or subdivision of the premises / land for which water connection is requested above, please provide the following information.

Water Account No	Category	Arrears as of this date

15. Explain the reason for requesting another water supply if there is an existing NWSDB water connection to this premises: (a second water supply in the same premises will be provided only to a detached house / building which has been completed)

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****IMPORTANT :** The board supplies water only up to the water meter. The water storage and distribution system in the premises should be properly arranged by the applicant as per his construction. *Since the Board will have to temporarily suspend the supply of water for any operation or repair work or any other type of work that may be deemed necessary for the proper functioning of the Board's water distribution system, the applicant shall arrange for daily storage of water equivalent to his daily consumption for such occasions.*

I/We declare that the facts stated in this application are true and, if any of the information given herein is found to be untrue, then I am liable / agree to pay any loss, arrears or penalty which the Board will calculate and state as having occurred without any objection and in case of my failure to do so, I declare that the Board can / I agree to disconnect the water supply obtained on the basis of false information.

.....
 Signature of Applicant

.....
 Date

I checked the information and attachments in the application and accepted it as complete.

Details of officer accepting the application Name :

Designatin: Signature :

Date :