

**** Emergency ****
Private Lateral Repair and/or Replacement Application

Application Submittal Date: _____

Homeowner Name: _____ Address: _____
(Please Print)

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Other: _____

Description of Problem: _____

Licensed Plumber Remarks: _____

Videotape Submitted: Y or N Video Completed By: _____ Date: _____
(Please Circle One)

Homeowner Signature: _____ Date: _____

Note: It is the homeowner's responsibility to notify the City and Contractor, prior to any excavation, the location of any underground utilities other than those located by IUPPS (Holy Moly).

Office Use Only

Video Review Comments: _____

City Employee Inspection Report: _____

Sump Pump Discharge: Yard ___ Storm ___ Sanitary ___

Work Assigned To: _____ Contractor Bid: \$ _____

Approved By: _____ Date: _____ Inspected By: _____ Date: _____