CITY OF SOUTH CHARLESTON
SANITARY BOARD

BOX 8336 ♦ SOUTH CHARLESTON, WV 25303 ♦ 768-4140

Application for Sewer Service

The undersigned is proposing to construct:

_____
(TYPE OF FACILITY)

at _____
(LOCATION)

_____

and desires sewer service to be provided by the South Charleston Sanitary Board. The undersigned deposits $250.00 with the Sanitary Board with the understanding if sewer service is not available the amount will be refunded without interest.

By: _____

Date: _____

Address: _____

_____

Phone: _____