

PORT CLINTON WATER WORKS



**1868 East Perry Street
Port Clinton, OH 43452**

**Phone 419-734-5522
Fax 419-734-5278**

KILL PERMIT

By-Laws, Section 107.03

Permission is granted to _____

Account Number: _____

Service Address: _____

To Kill All Connections:

_____ Performed by a Contractor (inspection fee required) _____

Contractor Name

Phone

_____ Performed by City (city standard fee – no inspection required - must be 2" or less in diameter)

_____ Catastrophic Event (i.e. fire, flood, tornado...) severely damaged/destroyed structure (no fees)

For:

_____ Larger than 1.5" in diameter

Kill Permit Fee: \$ 50.00

_____ Less than 1.5" in diameter

Inspection Fee: \$100.00

City Standard Fee: _____

Call for inspection:

Monday – Friday 7:30 – 2:00

Make check payable to: **Port Clinton Water Works**

Total: _____

Permit / Receipt

No. _____

Date: _____

Expires: _____

1 year from issuance

Office Manager