



CITY OF ELY

501 Mill Street Ely, Nevada 89301

City Hall (775) 289-2430

Fax (775) 289-1463

Cityofelynv.gov

APPLICATION WILL-SERVE LETTER FOR WATER/SEWER SERVICES

****Work may not commence until fees are paid in full at City Hall and required approval is received from City Engineer for residential or City Council for Commercial****

Name of Applicant: _____

Address:

Email: _____

Phone Number: _____

Applicant must provide documented proof that they are the owners of the property described below or provide a notarized statement from the legal owner that the Applicant is authorized to apply for a Will-Serve on the Owner's behalf.

Legal Description or address of property to be served, including size of water/sewer service needed. Description and number of sewer fixtures to be constructed is required if other than residential. Attach additional documentation if necessary.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident. Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <http://www.ascr.usda.gov/complaintfilingcust.html> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: Mail: U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410; Fax: (202) 690-7442; or Email: program.intake@usda.gov.

PLEASE NOTE: The City Engineer can approve this application if it is for a residence; otherwise, the Municipal Utility Board must review, and the City Council must approve the application. Will-Serve letters are not given to existing customers that have delinquent accounts with outstanding amounts due. * **Issuance of this Will-Serve authorizes the applicant to tap into and extend City utilities onto his/her property. All work must be performed by a Nevada Licensed Contractor in accordance with City standards and accepted by the City Engineer. All authority granted by this Will-Serve expires twelve (12) months after the date of issue.**

Nevada Licensed Contractor tapping line: _____

Nevada Contractor's License No.: _____

By signing this document, you are agreeing to comply with all rules and regulations relating to water and/or sewer contained in the latest version of the City Code of Ely, Nevada.

Applicant's Signature

Date

***In the event of a price increase in the application for water/sewer services instituted during the pendency of the application, the applicant will be responsible for the increased fee unless the application for it has been paid in full at the time the price increase takes effect.**

City Review Section:

Does applicant have any delinquent accounts: ____ Yes ____ No

Will Serve Fees are calculated by the City Engineer, and collected at City Hall:

Water \$ _____ Sewer \$ _____ Total Fees to be paid \$ _____

Amount Paid: _____ Date Paid: _____ Paid by: _____
(Check, cash, or card)

Administrative Signature: _____

Will Serve approved: _____ Date: _____
City Engineer Signature

If Commercial, date of approval by Ely City Council: _____

Will Serve Issuance Date: _____ Will Serve Expiration Date: _____