



**CITY OF STOW**  
**3760 DARROW ROAD – STOW, OH 44224**  
**330-689-2719**  
**EXCAVATING FOR WATER INFORMATION FORM**

Please complete **ALL** blanks.

Current Business Name: \_\_\_\_\_

Current Business Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Fed I.D. No. \_\_\_\_\_ Type of Contractor: \_\_\_\_\_

1. Do you have experience tapping waterlines with any governmental agencies? 

<u>No</u>	<u>Yes</u>
<input type="checkbox"/>	<input type="checkbox"/>

Please list three (3) References from the Governmental Agencies that you have done taps for under the Current Business Name: (Agency, Contact Person, Phone Number)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

1. Will another bonded contractor be doing the tap into our waterline for you? 

<u>No</u>	<u>Yes</u>
<input type="checkbox"/>	<input type="checkbox"/>

If yes, who? \_\_\_\_\_ Phone # \_\_\_\_\_

*I hereby certify that my work, undertaken pursuant to the issued registration, shall be of workmanlike quality and in accordance with all applicable and governing codes and specifications of the City of Stow in effect at the time of the issuance of my registration and of thereafter adopted. Also be it known that you or anyone working for you, in part or directly, begins working or opening taps or valves, hydrants, meters or water mains without proper notification to the City of Stow, for any reason, will be fined \$1,000.00 and contractor's license will be revoked.*

Signed: \_\_\_\_\_ DATE: \_\_\_\_\_  
Applicant's Signature (please print name after signature)

Signed: \_\_\_\_\_ DATE: \_\_\_\_\_  
City of Stow Authorized Signature