



PO Box 64, Crestone, CO 81131 • (719) 256-4313 • crestonetownoffice@gmail.com

**Notice to Connect to Municipal Water System**

**Property Owner**

\_\_\_\_\_  
Name Signature

\_\_\_\_\_  
Mailing Address City, State, Zip

\_\_\_\_\_  
Email Phone(s)

\_\_\_\_\_  
Property Street Address Lot/Block

**An inspection by the Town of Crestone is required after lines have been connected and before excavation may be backfilled. Either the contractor or the property owner may phone Town Hall to confirm the time of inspection. The cost of this inspection is \_\_\_\_\_, payable to the Town of Crestone. Billing for sewer service begins the date of the approved inspection.**

Date(s) of excavation to connect to municipal water tap: \_\_\_\_\_

Name and phone of contractor performing the work: \_\_\_\_\_

Estimated time and date for Town inspection of connection: \_\_\_\_\_

**ADMINISTRATIVE USE ONLY:**

Inspection performed by: \_\_\_\_\_ Date: \_\_\_\_\_

Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\$\_\_\_\_\_ Total Inspection Fee Paid Date: \_\_\_\_\_

Compliant with Town of Crestone Ord. # 2008-006 cross-connection prohibition and backflow prevention requirements? Yes  No

Approved for hookup? Yes  No

Clerk's Signature: \_\_\_\_\_ Date: \_\_\_\_\_