



CITY OF ELEPHANT BUTTE  
WASTEWATER TREATMENT SYSTEM SERVICE AGREEMENT

DATE: \_\_\_\_\_

OWNER NAME \_\_\_\_\_ 4 DIGIT SECURITY CODE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_ CELL \_\_\_\_\_

PHYSICAL ADDRESS (address to be serviced): \_\_\_\_\_

SUBDIVISION \_\_\_\_\_ UNIT \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

Septic Placement Date: \_\_\_\_\_

TYPE OF SERVICE:

Residential \_\_\_ Commercial \_\_\_ Industrial \_\_\_ Hotels/Motel-Units \_\_\_ RV Park Spaces \_\_\_ Restaurant/Bar #Chairs \_\_\_

Mobile Home Park \_\_\_ Car Wash Stalls \_\_\_ Laundry-Machines \_\_\_ Retail-Employees \_\_\_ Apartment Units \_\_\_

Dump Station \_\_\_ Residential RV Dump

Ownership Verification:

Copy of Tax Bill    Mortgage Contract    Notice from Assessor/Treasurer    Deed    Other \_\_\_\_\_

Please read each of the following and initial each.

- \_\_\_\_ 1. I understand and agree that I am responsible for all costs associated with connecting to the wastewater system including the physical construction from my home to the wastewater collection line.
- \_\_\_\_ 2. I understand and agree that although I may request billing to be sent to another party, I the property owner am responsible for all wastewater service and connection charges. In addition, I am responsible for updating my account billing information if modification is required.
- \_\_\_\_ 3. I understand and agree that only one service connection is permitted per application for services and no additional connections into the line servicing this property will be permitted without specific approval from the City of Elephant Butte.
- \_\_\_\_ 4. I understand and agree that I must comply with the standards, policies, rules and regulations as set forth in the City of Elephant Butte Ordinance Number 119 or subsequent requirements as adopted by the Council of the City of Elephant Butte. Copies of the Ordinance are available upon request.
- \_\_\_\_ 5. I understand and agree that the City of Elephant Butte and its agents shall have access to property and equipment located on my premises at all reasonable and necessary times for the purpose of maintaining or operating the wastewater collection system.
- \_\_\_\_ 6. I understand that I must decommission my septic tank according to CID or Environment Department regulations when connecting to the City sewer line.
- \_\_\_\_ 7. I understand that the City recommends that a clean out is installed at the property line. Diagram available upon request.
- \_\_\_\_ 8. I understand and agree that failure to abide by these Terms and Conditions of this agreement may result in fines, and penalties including but not limited to a lien being placed against my property and criminal prosecution

Signature \_\_\_\_\_

Date \_\_\_\_\_

Office use only

Capacity Fee +GRT \$ \_\_\_\_\_ Administration Fee +GRT \$ \_\_\_\_\_ Deposit \$ \_\_\_\_\_

Date Deposit Refunded \_\_\_\_\_ Code Enforcement Initial \_\_\_\_\_ Date \_\_\_\_\_

CID CERTIFICATE INSPECTION -IF REQUIRED - ATTACH CERTIFICATE TO BACK

ATTACH CID CERTIFICATE HERE:

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\_\_\_\_\_ Was the septic tank decommissioned at the time of connection to the City sewer system?

If not, why? \_\_\_\_\_

Signature of contractor: \_\_\_\_\_

ATTACH PROOF OF DECOMMISSION OF SEPTIC TANK

I, \_\_\_\_\_ of \_\_\_\_\_  
Name of Contractor Name of Business

Certify that any and all septic tanks at this address were decommissioned:

Date of decommission: \_\_\_\_\_

Signature (of contractor responsible for decommissioning septic tank):

\_\_\_\_\_

The tanks were decommissioned in the following manner:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature (of contractor responsible for decommissioning septic tank):

\_\_\_\_\_