

Moon Township Municipal Authority
1700 Beaver Grade Road, Suite 200
Moon Township, PA 15108-3193
Phone: 412-264-4300 * Fax: 412-262-9482

APPLICATION FOR COMMERCIAL SERVICE - Page 1 of 2 pages

Please Print, Complete Information & Fax Back to Fax Number Shown Above

Company Name: _____ Account No. _____

Service Address: _____

Bill To Address: _____

City, State & Zip: _____

Telephone Number (1): _____

Telephone Number (2): _____

Purchase Date: _____

Tax ID No. _____

Are you an Owner _____ Or Tenant _____

If you are a tenant, please complete owner information.

Owner Name: _____

Owner Address: _____

Owner City, State & Zip: _____

Owner Telephone No: _____

**MOON TOWNSHIP MUNICIPAL AUTHORITY APPLICATION FOR SERVICE Fax:
412-262-9482**

I HEREBY MAKE APPLICATION FOR USE OF SERVICES INDICATED BELOW AND AGREE TO BE GOVERNED BY THE RATES, RULES AND REGULATIONS AS ADOPTED BY THE AUTHORITY AND FURTHER AGREE THAT I SHALL NOT PERMIT SURFACE OR ROOF DRAINAGE TO BE CONNECTED TO, OR ENTER THE SANITARY SEWER SYSTEM FROM THE DESCRIBED PREMISES.

SIGNATURE _____

INSURANCE COVERAGE FOR SANITARY SEWER BACKUPS

Following the unpleasant event of a sanitary sewer system backup, some sanitary sewer customers have learned that neither their insurance company nor the Moon Township Municipal Authority (MTMA) is responsible for damages incurred. The Moon Township Municipal Authority is not responsible for sudden and/or unforeseeable sanitary sewer backups and many homeowners' insurance policies do not provide coverage for these occurrences. Please check your property insurance to verify that you have adequate coverage. In the event of a sanitary sewer backup, you may call the MTMA to verify the sanitary sewer main is not clogged. If the backup is being caused by your sanitary sewer service line, it will be your responsibility to correct. _____ Customer Initial **MTMA use only:**

Services applied for:	___Water	___Sewer
Activation Fee: _____	Date Paid: _____	

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