

**CARROLLTON TOWNSHIP
WEEP TILE DISCONNECTION APPLICATION**

Date: _____

Permit No: _____

Address of Connection: _____

Property Owner: _____

Current Address: _____ Phone: _____

Contractor Name: _____

Contractor Phone: _____ Cell _____

Permit Fee	\$25.00
Inspection (Regular Work Hours)	\$50.00
Inspection (Outside Regular Work Hours)	\$75.00

Permit Fee:	\$	25.00	GL 590-000-476-000
Inspection (Regular)	\$	50.00	GL 590-000-476-000
Inspection (after hours)	\$	_____	(\$75.00/hr)

TOTAL PERMIT FEE **\$** _____

Property ID Number: _____

Inspected by: _____ Approved _____ Rejected _____

Comments:

D.P.W. Approval: _____