Hot Tap Permit

520 E. Cascade Avenue | PO Box 39 - Sisters, Or 97759 | ph. (541) 549-6022 | www.ci.sisters.or.us

Select One: ☐ Water ☐ Sewer

Property Owner Information:

Name _____ Date _____ Phone _____

Street Address _____ City/State _____

Project Information:

Street Address _____ City/State _____

Tax Description T15 R10 S _____ Tax Lot # _____

Contractor Information:

Name _____ License # _____

Street Address _____ City/State _____

Bonding Company _____ Liability Ins. # *(Copy of Insurance Binder)*

NOTE: 1) All forms to be inspected prior to pour. Call Public Works (541) 323-5212 Minimum 24 hour advance notice required.
2) All work will conform to City Standards Specifications

SITE PLAN

Sketch by owner or contractor showing location of work shall be submitted for approval prior to commencing work (use back of form for sketch).

		Transaction Code #
¾" Water Hot Tap:	$500.00	108
4" Sewer Hot Tap:	$550.00	109

Approved for Backfill _____ Date _____
City Inspector

_____ Date _____
Contractor or Developer