



Liberia Water & Sewer Corporation,  
Monrovia.

## APPLICATION FORM FOR WATER/ SEWAGE CONNECTION

Title (tick appropriate box) **Mr.**  **Mrs.**  **Miss.**  **Dr.**  **Prof**

Surname

Middle Name  First Name

Gender:            Male             Female

Company Name (if applicable):

Contact Address:

Locality/ Village:  Email:

Mobile no:  Home no:

Applicant Occupation/ Mode of Business:

**FOR OFFICE USE ONLY**

Commercial Customer Services

Application date:

Application letter attached:

**Indicate Customer's Category:**

Family Customer:  
Business Customer:  
Government

Application Considered:    Yes / No

**STATUS OF APPLICANT**  
(Tick where applicable)

Owner of Premises <input type="checkbox"/>
Tenant <input type="checkbox"/>
Occupier <input type="checkbox"/>

No of Occupants/Family:

If applicant is not the owner, then provide details of the owner of the Premises below:

Name:

Address:

Occupation:

Payment Advice Issue date:

Actual Payment date:

Actual Amount paid:

**Asst. Mgr. Customer Services**

Sign/Date

**Authorization (sign/date)**  
**Commercial Service Manager**

**PREMISES USAGE**

Residential only

Mixed Used (residential/business)

Commercial use only

Industrial use only

Other (specify)

<b>TYPE OF CONNECTION APPLIED</b>	Domestic <input type="text"/>
	Commercial <input type="text"/>
	Industrial <input type="text"/>
	Government <input type="text"/>

**Technical Services Verification Checklist**

Please indicate Yes/No where appropriate

Site/ Location Mapping Verified:

Sketch Attached:

Plumbing Inspection:

Best quality materials:

Declaration

I/We, the undersigned, hereby declare that the information given on this application is true and correct, that all applicable fees and charges shall be paid and that I/we shall abide by the relevant guidelines associated with the service Provided.

Name:

Signature:

Date: