



# Stoney Creek Sanitary District

(County of Shenandoah, Virginia)  
600 NORTH MAIN STREET, SUITE 106  
WOODSTOCK, VIRGINIA 22664  
[www.shenandoahcountyva.us/water](http://www.shenandoahcountyva.us/water)

Phone (540) 459-7491  
Fax (540) 459-7652

Office Hours:  
Mon.-Fri. 8:30-4:30

## APPLICATION FOR (1) DAY / (24) HOURS RE-CONNECTION OF WATER/SEWER SERVICE FOR HOME INSPECTION

LOCATION: \_\_\_\_\_ ACCT. # \_\_\_\_\_ - \_\_\_\_\_

E911 ADDRESS: \_\_\_\_\_

PART I: The Following Information needs to be Completed by Person Requesting Service:

A. Name: \_\_\_\_\_

B. Address: \_\_\_\_\_  
\_\_\_\_\_

C. Phone: (\_\_\_\_) \_\_\_\_\_ (Day) (\_\_\_\_) \_\_\_\_\_ (Night)

D. Requested Date/Time of Re-Connection: \_\_\_\_\_

PART II: Fees to be Paid by Person Requesting Service:

A. A **\$50.00** Service Fee Must be Paid **Before** the Water and/or Sewer Service will be Restored. This Service Fee provides an allowance for service for 1 day/24 hours from the time that service is restored & up to 300 gallons of usage without any additional charges. Any additional usages will be subject to additional charges. Service will be provided **Only** during normal business hours (Mon-Fri).

PART III: Please read the following agreement and place your signature in the appropriate space.

I, the undersigned, do hereby agree to be bound by the Sanitary District's Rates, Rules and Regulations as established by the Shenandoah County Board of Supervisors including subsequent amendments thereof and additions thereto. I also do hereby agree that I will be responsible for any damages or consequences that may occur as a result of the water/sewer service being restored.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date