



CITY OF LAKE STATION
1969 CENTRAL AVE.
LAKE STATION, IN 46405
PH: 962.4444 Fx: 850.1386

SEWER REPAIR PERMIT APPLICATION

Permit No. _____

Please fill out the following Information. You will receive a telephone call when your permit is ready for Pickup.

*Note: Please Allow 3-4 Business Days to Process your Application. The application fee is non-refundable.

Lake Station, Indiana

Date: / /

An application is hereby filed by:

Name and Address Phone Number

To be located at:

Street Address

Property Owner:

Name Phone Number

Type of Structure: _____ Zoning District: _____

Please Circle appropriate answer below

In special Flood Hazard Area (100 Year Flood Plain)?

Yes / No

Is the location Residential or Commercial?

Residential / Commercial

Comment(s): _____

All to be done only in accordance with any plans and specifications on file and as listed above and in accordance with all ordinances and laws thereto applicable.

Sewer Inspector

Signature

Applicant Signature