## NOT FOR SALE



# **NAKURU WATER AND SANITATION** SERVICES CO. LTD

Nakuru Water & Sanitation Services Co. Ltd. P.O. Box 16314-20100 Nakuru. infor@nakuruwater.co.ke Government Rd, Nawassco Plaza

Tel: 051- 2212269

Toll Free Line 0800-720036

www.nakuruwater.co.ke

Enrichina Life

Nakuru Water and Sanitation Services Company Ltd @Nakuru Water

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	SEWER APPLICAT	<u> FION FORM</u>	
To:			
Managing Director		N	
Nakuru Water and Sanitation P.O. Box 16314-20100	on Services Company Limited	D 4 (F)	
<u>NAKURU</u>		<b>DATE:</b>	
	PART I		
I (Landlord's Name)		Mobile No:	ID NO:
	of postal address		
E-mail	PIN NO		
	sion to connect my property dra		
NO	Section	along	Street/Road/Lane.
	. The leng		
	Street/Road/Lane is		
	13/		
Name of the contractor to	o undertake the drainage work is		of Postal
	Drainlayers Re		
	icense Number is		
and Carrent County Trace I	2		eopy of eurrent treense)
		5	
	PART II	9	
	1 4 100		
I / We	P	Mich	agree to comply
with all the rules, regulation	ions and provisions as specified i	n the Customer Contrac	t Agreement and Code of
Conduct and hold myself/or	urselves responsible for the satisfac	tory use of the sewerage	system. I / We undertake to
ensure that only such waste	es as is permitted shall be discharge	ed into the sewer excluding	g any form of inflammable
substance, non-biodegradab	ole or such matter that would interfe	ere with the smooth flow	of wastewater in the sewers
and to take precautions as	to keep the drains within good s	tate of repair. In the eve	ent of defects arising from
unsatisfactory use of the sa	ame, the company may impose sucl	h penalties as is stipulate	d in the Rules, Regulations
and Code of Conduct. I / W	Ve also agree to preserve of the com	npany to allow further co	nnections to be made to the
	for the purposes of draining wastew		
Cionatura of Amiliaant		Data	
Signature of Applicant:		Date:	

### **PART III**

# **TECHNICAL INFORMATION**

(To be completed by the applicant)

# a) DOMESTIC WASTE WATER

NO	DESCRIPTION	NO	SPECIFICATION
1.	Water Closets (we)		
2.	Bath Tabs		
3.	Shower Rose		
4.	Kitchen Sink		
5.	Wash Hand Basin		
6.	Stand Pipes		
7.	Family Units		

### b) TRADE WASTES

Three copies of the design calculations and drawings of the proposed pre-treatment facilities shall accompany the application form.

### **NOTE:**

- a) A sewer profile shall accompany the application form in all cases where the proposed length exceeds 30R/Metres. In any other case, a sketch map shall be attached
- b) For hotels and industries a duly signed tripartite agreement for effluent discharge shall accompany this form

# OFFICIAL USE ONLY

a)	Outstanding Water Bill Kshs	as at	
	Diameter of existing sewer is	Leng <mark>th of propose</mark> d sewe	r lineassessed
	bySign	Date	
	Recommendation by the Sectional Head	Sign	Date
b)	Departmental Approval - Technical		
	☐ Approved ☐ Not Approved	TATION SERV	
	Technical Manager		
	Enrich	_Sign	Date
c)	Connection Fee Kshs(	as per the approved tariff)	
d)	Drainage Works Supervised by	Sign	Date
	Connection Fee Paid Kshs	Receipt No	Date
	Date Connection Done		
e)	<b>Department Approval – Commercial</b>		
	☐ Sewer Charge Updated		
	Billing OfficerSign_	Date	e