

**Holiday Shores Sanitary District
618-656-4933
Preliminary Building Application**

Applicant:
Name: _____
Address: _____ _____
Phone: _____

Service Address:

Description of permitted operation(s):

This application must be filled out and signed by the applicant and a representative of the Holiday Shores Sanitary District before submitting to the Building Committee at the Holishor Association office. The applicant/builder must also come by the Holiday Shores Sanitary District to fill out all additional paperwork for water and sewer connections.

New Sewer Connection Fee: 7' Unit -
10' Unit -
12' Unit -

New Water Connection Fee:

Water and Wastewater Deposit:

Connection fees are in effect but subject to change without notice. Please contact Holiday Shores Sanitary District for the current fee amounts.

Applicant Authorized Signature

Authorized Signature of the District

Date

Date