

STANDARD PRESSURE WAIVER FORM

Full Name of Applicant(s): _____ Account No. _____

Mailing Address: _____

Physical address of property of water tap _____

If You are NOT property owner of this location-their name, address & phone must be provided:

I have been informed that Clay Roane PSD may not be able to deliver water to the dwelling located at the above address at satisfactory pressure in accordance with Rule 7.8.4 as issued by the WV PSC Rules and Regulations:

“A customer’s pressure shall not be less than twenty (20) p.s.i. at peak demand or system or thirty (30) p.s.i. static pressure at the terminus of the utility’s service line (meter box or curb box) unless the customer has waived this requirement. For all new customers desiring service on or after October 24, 2003, a customer’s pressure shall not be greater than one hundred thirty-five (135) p.s.i. unless the customer has waived this requirement. The utility shall keep on file all the aforesaid waivers in accordance with water rule 4.1” There was no maximum pressure stated in the WV Rules and Regulations before October 24, 2003. Therefore, the maximum pressure waiver does NOT apply to any taps/locations served before that date.

Therefore, I/We agree to accept water service at the pressure the utility is able to deliver to the address listed above (and changes to service at that address as assigned as long as same metering location) with the existing facilities. Should it be necessary to increase or lower the water pressure to provide adequate service to the above address, I agree that all installation and maintenance costs and expenses to maintain the pressure will be at my/our expense (often PRV - pressure reducing valves- are necessary to maintain a constant pressure on private service lines and/or interior plumbing because of the terrain in the area).

I confirm that I/we understand this waiver is addressing pressure as it exists at the meter point only.

This waiver agreement, its terms, and conditions, shall be binding on future conditions, shall be binding on future customers served at the above location under similar circumstance/conditions. This agreement will be on file at the Clay Roane PSD office. You may want to record this agreement with your deed at the County Clerk’s office in Clay or Roane County.

Signature of Applicant(s): _____ Date _____

CO Applicant/Property Owner: _____ Date _____

Office Use: Circle Concern:

High Pressure

Low Pressure