

**ANNE ARUNDEL COUNTY, MARYLAND  
WATER AND/OR WASTEWATER PETITION**

Please check one:

**WATER SERVICE**       **WASTEWATER SERVICE**       **WATER & WASTEWATER SERVICE**

**PETITION #:**

**DATE:**

**NOTE: Be certain all information requested is supplied and is easily understandable. Otherwise, your Petition may be delayed.**

- I. This Petition is submitted for consideration, in accordance with Article 13, Title 5, Section 303 of the Anne Arundel County Code. The undersigned accepts responsibility, as spokesperson, for this group of petitioners.

The undersigned spokesperson hereby confirms that the signatures appearing in Section III of this petition are those of owners of real property within the original petitioned area. Also, that the petitioners are aware of the purpose of the Petition, which is to abate a previously submitted petition, for the area described below.

\_\_\_\_\_  
NAME (Printed)

\_\_\_\_\_  
NAME (Signed)

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
TELEPHONE NUMBER

- II. The area being Petitioned is described as follows:

(a) is named \_\_\_\_\_

(b) is in the subdivision or locality named \_\_\_\_\_

(c) is in the \_\_\_\_\_ assessment district.

(d) Is near a landmark known as \_\_\_\_\_

- III. PETITION VALIDATION INFORMATION. The petitioned area:

(a) is approximately \_\_\_\_\_ feet long.

(b) has \_\_\_\_\_ existing homes.

(c) has a total of \_\_\_\_\_ properties.

(d) has to the best of my knowledge \_\_\_\_\_ property owners while this petition has signatures of \_\_\_\_\_ property owners.

- IV. We, the undersigned petitioners, do hereby acknowledge that we will become subject to all charges, i.e., Capital Connection, Usage Charges, Front Foot Benefit Charges, Capital Facility Assessment Charges and Environmental Protection Fees in effect at the time of connection.

- V. We, the undersigned, do hereby acknowledge that a majority of real estate owners within the area requesting service must be a party to the petitioning process.

- VI. Petitioners should note that: although a petition has been submitted, and is found to be valid, the actual construction of water and/or sewer lines depends on whether a project will be self-supporting, and if the necessary funds are available. Should the rate per foot exceed the maximum, as described under Article 13, Title 5, Section 602 of the Anne Arundel County Code, the project will be suspended; unless a majority of the property owners petition the County Council to establish a special rate.

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VII. In the space below, draw a map of the location of the area being petitioned, showing sufficient detail so employees of the Department can locate the area on tax maps, etc. Give as much detail as possible. Specifically identify the streets in the area being petitioned.

I/WE HAVE READ AND UNDERSTAND SECTIONS I-VII INCLUSIVE OF THIS PETITION:

Mailing Address

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Phone:

---

Owner Printed Name

---

Owner Signature

Date

Witnessed by:

---

Printed Name

Mailing Address

---



---



---

Phone:

---

Owner Printed Name

---

Owner Signature

Date

Witnessed by:

---

Printed Name

Property Identification

Tax Account No.:

---

Lot No.:

Block:

---

Street Address:

---

Mo/Yr Property was developed: \_\_\_\_\_

---

Co-Owner Printed Name

---

Co-Owner Signature

---

Signature

Date



Property Identification

Tax Account No.:

---

Lot No.:

Block:

---

Street Address:

---

Mo/Yr Property was developed: \_\_\_\_\_

---

Co-Owner Printed Name

---

Co-Owner Signature

---

Signature

Date

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone:

Owner Printed Name

Owner Signature Date

Witnessed by:

Printed Name

Property Identification

Tax Account No.:

Lot No.: Block:

Street Address:

Mo/Yr Property was developed: \_\_\_\_\_

Co-Owner Printed Name

Co-Owner Signature

Signature Date

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone:

Owner Printed Name

Owner Signature Date

Witnessed by:

Printed Name

Property Identification

Tax Account No.:

Lot No.: Block:

Street Address:

Mo/Yr Property was developed: \_\_\_\_\_

Co-Owner Printed Name

Co-Owner Signature

Signature Date

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone:

Owner Printed Name

Owner Signature Date

Witnessed by:

Printed Name

Property Identification

Tax Account No.:

Lot No.: Block:

Street Address:

Mo/Yr Property was developed: \_\_\_\_\_

Co-Owner Printed Name

Co-Owner Signature

Signature Date