

Government of Arunachal Pradesh
Public Health Engineering Department

Form of Application for new Water Connection

1. Name of the Applicant

2. ☐ Father's/ ☐ Husband' s Name

3. Address

4. Location of the building Land for
which connection is sought

5. Documental proof of ownership/
Tenancy's

I Shri/Shrimati

declare that the information given above are true to the best of my knowledge and I shall be liable for taking appropriate action by the department if found incorrect .I should also be abide by the rules and regulations of the department .

Date

Signature of the applicant.