

ANNVILLE TOWNSHIP AUTHORITY

P. O. BOX 320
ANNVILLE, PA. 17003-0320

(717) 867-4476 * FAX (717) 867-0916

AFFIDAVIT

The undersigned being duly sworn according to the law deposes and says that the sewer use for the property at _____ will change from _____ **units** to _____ **unit(s)** as of the _____ day of _____, 2022; further, the undersigned does represent to the Annville Township Authority that before the property is used for _____ **units**, the Authority will be so notified in writing.

Name (printed or typed)

Signature

Sworn to and subscribed
Before me this _____ day
Of _____, A.D., 2022.

Notary Public
My Comm. Exp.