



Repair #

CITY OF UNIVERSITY CITY  
Public Works Department

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**Sanitary Sewer Lateral Repair Program Application**

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*PLEASE PROVIDE ALL INFORMATION REQUESTED*

Property Owner Name: *(please print)* \_\_\_\_\_

Property Owner Name: *(signature required)* \_\_\_\_\_

Telephone #: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address Where Defect Exists: \_\_\_\_\_  
Zip Code

Address to Send Information: \_\_\_\_\_  
Zip Code

Property Locator #: \_\_\_\_\_ (Obtain the property locator number from your U. City refuse bill, St. Louis County Real Estate Tax bill or call the St. Louis County Assessor's office at 615-2555).

Mail or deliver the application, videotape, and drawing/sketch to:

City of University City  
Public Works Department – SSLRP  
6801 Delmar Blvd., 3<sup>rd</sup> Floor  
University City, MO 63130

You will be notified in 10 business days of the status of your application. Contact Public Works 505-8560, from 9 a.m. – 5 p.m. with questions and be sure to keep a copy of that application and receipts!

See Reverse for Additional Information.

