

**CITY OF CANTON  
BACKWATER RESPONSE INITIATIVE  
PROGRAM APPLICATION**

I/we, \_\_\_\_\_, the owner/s of the  
property located at \_\_\_\_\_

do hereby request consideration by the City of Canton to be accepted for participation in the Backwater Initiative Prevention Program. I/we understand the Program involves assistance being provided only if the below address is affected by surcharging of the City's sewer collection system. By submission of this application, the City will take steps to make this determination and I/we will grant legal access to the property and cooperate with City staff during their investigation. Further, I/we agree to all terms and conditions of this program.

Mailing Address of the Applicant: \_\_\_\_\_  
\_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cellular: \_\_\_\_\_

Business: \_\_\_\_\_ Fax: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name