Availability - The Water Service Line Protection Program is available to residential customers living in single-family or single-owner duplexes. We are also offering the Water Service Line Protection Program to some town home associations and individual twin homes where each has its own water service line. At this time, this program excludes mobile homes, apartments, commercial and industrial property. Coverage may not be applicable to all single-family homes, twin homes and/or duplexes. Pre-existing conditions (leaks, improper installation, etc) render the resident ineligible for our program. If repairs are made to correct these problems, at your cost, you may become eligible.

Coverage - Call the City of Goodview. The City will call a contractor if needed. In the absence of Coverage, you are responsible for all service line repair cost from the City’s water main to your house. With coverage, which has a maximum annual allowable allowance of $6,000, the City will make all repairs to the water line and perform restoration all the way to your house foundation (this includes the street, public sidewalk, curb, boulevard, driveway, and sod for your yard.) You are responsible for any trees, shrubs, patio pavers or ornamental decorations, watering the sod, and any settling due to compaction. The City of Goodview is not responsible for incidental or consequential damage inside your dwelling resulting from a service line break. Check with your homeowner’s insurance for this type of coverage.

Monthly Fee – A monthly fee of $4.00 for City water customers (not private wells) will be added to your monthly utility bill. Failure to pay by the due date may be cause for the City of Goodview to drop you from the program. The City of Goodview reserves the right to modify this price and any such modification will be indicated on your next utility bill.

Terms – This Agreement is effective on the date it is received by the City of Goodview. It does not cover water freeze-ups, thawing of frozen water lines, damage from frozen water lines, interior water lines, or the shut off valve in your house. There is no cancellation charge and you may cancel at any time, however if you cancel, there is a one year waiting period to reinstate the service agreement.

City of Goodview’s Right of Inspection – The City of Goodview reserves the right to inspect your water line should you inform the city that a problem or damage has occurred. Your premises shall be made available to the City of Goodview for such an inspection.

Homeowner’s Responsibilities – You shall cooperate with the City of Goodview and provide the City with all information requested.
**Default** – The City of Goodview may cancel this agreement immediately if you violate any provisions of this agreement. The City of Goodview is entitled to recover its costs and expenses, including reasonable attorney's fees, if legal action is necessary. The City reserves the right to refuse coverage to any customer for any non-discriminatory reason.

**Miscellaneous** - The laws of the State of Minnesota shall govern this Agreement. This Agreement is the final expression and a complete and exclusive statement of the terms of the Agreement, superseding all prior Agreements and understanding, whether written or oral. No delay or omission by either party in exercising and right under this Agreement shall operate as a waiver of that or any other right. If any provision of this Agreement is invalid, such provisions shall be omitted, but the remaining provisions of the Agreement shall be given full force and effect.

**Disclaimers** - This program does not cover service replacements within the street right-of-way done in conjunction with street repair/replacement project.
I have read and agree to the City of Goodview’s Water Service Line Protection Program’s Terms & Conditions Agreement.

Customer Signature _____________________________ Date _____________________________

Name (Please print) ________________________________

Street Address ________________________________

Daytime Phone Number ________________________________

Office Use Only

City of Goodview Representative _____________________________ Date _____________________________

Account Number ________________________________ Coverage Start Date _____________________________

Pre-Agreement Inspection

Inspector _____________________________ Inspection Date _____________________________

Notes: __________________________________________________________

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