



## TAUD Database Update Form

Office: (615) 896-9022    Web: [www.taud.org](http://www.taud.org)



Utility Name:		Contact:	Position:
Mailing Address:		Shipping Address:	
City:	St: TN Zip:	City:	St: TN Zip:
County:			
Phone:	Fax:	Emergency Number:	
Web site:		Email:	
General Manager:		Office Manager:	
Office Hours:			
Board Meeting-Frequency:		Date:	Time:      Location:
Commissioners: <input type="checkbox"/> Elected <input type="checkbox"/> Self Appointed <input type="checkbox"/> Mayor Appoints   Other:			
Name:	Position:	Term:	
Name:	Position:	Term:	
Name:	Position:	Term:	

### Please complete the appropriate sections for your utility:

#### **Water**

*Please select one:*  Surface Water    Groundwater    Purchase Water-from where:

Contact:		Email Address:	
Plant Address:		PWSID #:	Design Capacity:
City:	St: TN Zip:	Connections:	Treatment Grade: <small>Select Grade</small>
Phone:	Fax:		

#### **Wastewater**

Contact:		Email Address:	
Plant Address:		NPDES #:	Design Capacity:
City:	St: TN Zip:	Connections:	Treatment Grade: <small>Select Grade</small>
Phone:	Fax:		

#### **Gas**

Contact:		Email Address:	
Address:		Connections:	
City:	St: TN Zip:		
Phone:	Fax:		

#### **Distribution/Collection**

Contact:		Email Address:	
Address:		PWSID #:	
City:	St: TN Zip:	Collection Grade: <small>Select Grade</small>	Distribution Grade: <small>Select Grade</small>
Phone:	Fax:		

Please E-mail completed update form to [TAUD@taud.org](mailto:TAUD@taud.org)