

**APPLICATION FOR CONNECTION TO WATER SYSTEM**  
*(PLEASE PRINT)*

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

PHONE NUMBER HOME: \_\_\_\_\_ WORK: \_\_\_\_\_

LEGAL DESCRIPTION OF PROPERTY TO BE SERVED: \_\_\_\_\_

---

SIZE OF TAP REQUESTED: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

-----  
*OFFICIAL USE ONLY*

*Permit No.* \_\_\_\_\_

**WATER MAIN REQUIREMENTS**

LETTER OF INTENT TO SERVE WATER ON FILE, BEEN CHECKED AND ATTACHED  
YES \_\_\_\_\_ NO \_\_\_\_\_

WATER DISTRICT: \_\_\_\_\_ EXISTING LINE SIZE: \_\_\_\_\_

WATER LINE EXTENDED OR ENLARGED? YES \_\_\_\_\_ NO \_\_\_\_\_ NA \_\_\_\_\_  
(As a requirement for subdivision approval)

IF YES, GIVE DETAILS (size, length, etc.) \_\_\_\_\_

---

PAYMENT MADE IN LIEU OF EXTENSION OR ENLARGEMENT? YES \_\_\_ NO \_\_\_ NA \_\_\_  
(As a requirement of subdivision approval)

AMOUNT \_\_\_\_\_ PROPERTY FRONTAGE \_\_\_\_\_

REBATE AGREEMENT APPLICABLE? YES \_\_\_ NO \_\_\_  
NAME OF REBATE AGREEMENT \_\_\_\_\_

IF YES, COST PER FRONT FOOT \_\_\_\_\_

SIZE OF TAP APPROVED \_\_\_\_\_ (If meter is larger than 1"; Public Works Director must approve and sign this form.)

WATER BILLING INFORMATION

USE – RESIDENTIAL \_\_\_\_ COMMERCIAL \_\_\_\_ CONDOMINIA \_\_\_\_

IF CONDOMINIA, IS IT MULTI-METERS OR SINGLE METER? \_\_\_\_\_

NUMBER OF DWELLING UNITS SERVED \_\_\_\_\_

INSIDE \_\_\_\_ OUTSIDE \_\_\_\_ ZONE \_\_\_\_\_

**IF WATER TAP LOCATED OUTSIDE CITY LIMITS, ANNEXATION AGREEMENT MUST BE SIGNED**

Has rebate agreement been drawn up? YES \_\_\_\_ NO \_\_\_\_ N?A \_\_\_\_

Has map been updated in Engineer's office? YES \_\_\_\_ NO \_\_\_\_

Has annexation agreement been signed? YES \_\_\_\_ NO \_\_\_\_ N/A \_\_\_\_  
(copy of deed to accompany annexation agreement)

If required, have as-built plans been received for an extension or enlargement? YES \_\_\_\_ NO \_\_\_\_

Has recorded, addressed plat been received? YES \_\_\_\_ NO \_\_\_\_

REBATE FEES\$ \_\_\_\_\_

CASH-IN-LIEU FEES\$ \_\_\_\_\_

FEE FOR TAP\$ \_\_\_\_\_

FEE FOR METER\$ \_\_\_\_\_

TOTOAL FEES\$ \_\_\_\_\_

\_\_\_\_\_  
CITY ENGINEER PUBLIC WORKS DIRECTOR

DATE PAID \_\_\_\_\_

-----

cc: Public Works Dept., Water Billing Office, Administration Dept.

(All necessary signatures must be present before tap is sold.)