

Water Permit Application

Executive Director
Jason Molino
Deputy Director
Lauren Monaghan

Tax Parcel ID)			Date				
Servi	ice Add	ress							
				Owner Info	ormation				
Ov	vner			Owner init	Phone				
Address, City, State,				Email					
Z	Zip								
		T		Contractor Ir					
	tractor				Phone				
Address, City, State, Zip					Email				
Building Type:			Perm	nit Type: Check One	New Service: Yes No		No	Existing Service:	
Non-Residential			New	Connection	In Ao Dis	In Ag District		To Be Re-used	
Use			Rena	ir/Addition		_		Yes No	
Single	Resident	ial			Sprinkler	Sprinkler System		Size (If known)	
Multip	le Reside	ntial	Disco	onnect/Reconnect	Irrigation	System		Size (II Kilowii)	
				anent Disconnect					
- Com - Com - Cros	npliance v npliance v ss Connec es subjec	with all with the ction Co	applicable Water requirements and ontrol has been and nge periodically d	tive understands and agree Service Rules & Regulations for specifications in the Wat d/or will be evaluated as par lue to vendor availability and cies can be found on our we	s ter and Sewer t of the permi d pricing	Service Installation t review process		nes	
Owner Signature							Date		
	ce Use On *****		*****	******	******	******	*****	******	
Size	QTY	N/A	Application Fe	ee					
			Tapping Fee						
			Inspection Fee			Payment Information:			
			Meter Pit Fee			Paid via Check	#		
			Meter Fee			Dat	e:		
					Paid via	Existing Account	#		
			Other			Bill Issue Dat	e:		
Total Permit Charges:				es:			•		

LCWSA Water and Sewer Service Permit Sketch

Street Address:		
Street Address.		

This form shall be used unless Site/Utility Plans have been prepared for the proposed Construction

Please provide an accurate sketch of the poprosed work including: description of work to be done (pipe diameter, material, and length etc.); Location of site features (utility poles, hydrants, manholes, valves, overhead and underground utilities, buildings, driveways, curbs, sidewalks, retaining walls etc.)

