



# WATER TAP PERMIT

<b>PROJECT INFORMATION</b>							<b>TRACKING No:</b> -		
Property Owner/Project Name:									
Location/Street Address:									
Lot Number(s):									
Size of Service(s):	3/4"	1"	1 1/2"	2"	4"	6"	Other "	Type of Service	Domestic Fire
No. of Services:									
<b>PROPERTY OWNER</b>									
Name(s):									
Address:									
City:				State:			Zip:		
<b>CONTRACTOR/AGENT</b>									
Business Name:									
Address:									
City:				State:			Zip:		
Name of contact person:									
Phone:			Fax:			Email:			
Owner      Agent									
<b>SIGNATURE:</b>							<b>Date:</b>		
<b>OFFICE USE ONLY</b>									
Water Tap Fee \$						Receipt No.			
Approved by:							Date:		

Fax Copies to:     Health     Fire     Utilities     Water

Email to:         Underground

Applicant:       Email     Fax     Mail/Copy