

**APPLICATION FOR WATER AND SEWER SERVICE AND TAP PERMIT
SINGLE-FAMILY RESIDENTIAL, SECONDARY RESIDENTIAL,
DUPLEX AND SPECIAL CLASSIFICATIONS**

Please complete and return with your tap fee payment of **\$6900**/eqr to the RFWSD. Approved permits may be issued after a processing period of five business days.

Applicant Information

Name of Applicant: _____
 Applicant Address: _____
 Applicant City/State/Zip: _____
 Applicant Phone(H) _____ (W) _____ (Fax) _____

Owner Information

Owner of Property to be Served: _____
 Mailing Address for District Billings: _____
 Mailing City/State/Zip _____
 Owner Phone:(H) _____ (W) _____ (Fax) _____

PROPERTY TO BE SERVED

Services Desired: Water Sewer **Irrigation Water Source:** District Raw

Legal Description of Property to be Served: (Attach copy if necessary) _____

Street Address of Property to be Served: _____

Subdivision or Development: _____ **Lot:** _____

Structures on Property (if there is more than one structure of the same type or for duplex or triplex units, give separate information for each):

	<u>Primary</u>	<u>Secondary</u>
Square Footage:	_____	_____
Bedrooms:	_____	_____
Kitchens:	_____	_____
Square Ft. of Irrigated Green Space:	_____	_____
Hot Tub – specify size in gallons	_____	_____
Other water uses or structures (e.g. swimming pools, fountains)	_____	_____

I, the applicant named above, as lawful owner of the property described above or on behalf of the lawful owner, hereby apply to the Roaring Fork Water & Sanitation District for the privilege of water and/or sewer service pursuant to §7.03 of the District's Rules and Regulations. I certify that the above description of the property to be served, and the structures thereon, is accurate. I understand that I must have the new tap inspected by District representatives and hereby consent to an inspection of the premises at a reasonable time and in a reasonable manner for the purposes of approving the tap and verifying the tap fee to be charged. I agree to abide by the Rules and Regulations of the District as set by the Board of Directors and amended from time to time, and to notify the District of any changes in the structures or water uses described in this application.

 Applicant _____
Date

OFFICIAL USE ONLY

Tap Fee Due
 Water EQR _____ x \$3000 = \$ _____
 Sewer EQR _____ x \$3900 = \$ _____
 Total = \$ _____

Tap Fee Paid
 Date _____
 Paid By _____
 Amount _____ Ck # _____