

UTILITY PERMIT Application

FOR OFFICIAL USE ONLY									
PERMIT	#								
DATE			CLER	K					
□WTR		WR	□IRR		RECONNECTION				
□CONTRACTOR □OWNER/BUILDER									

		PROPERTY II	NFORMAT	ION				
Property Owner :								
Site Address :			Block/I	Lot#:				
Phone:			Strap:					
Email :								
	CONT	RACTOR/OW	NER INFO	RMATION				
Contractor/Owner:			Licens	License Holder's Name:				
Mailing Address:			City Li	cense #:				
City:	State: Z		State I	State License #:				
Phone:	·		Fax :					
Email:			·					
didvised of all easements acknowledge and accept ayment of all legally eXPANSION FEES, AN Please be aware that the lamage, including replactan be completed until a por illegal connections.	e permittee is responsible ement of damaged bioswa City installed potable wate DR'S AFFIDAVIT: I certify	ork will be done in co ance with the currer g this development for any damage to le media, must be re er meter, Irrigation m	empliance with the Florida Build the application, City infrastruct paired prior to the application of the second paired prior to the application of the second the second of the second of the second the second of the s	all applicable I ding Code, reg including, PEI ture, including final inspection ion Kit A has b	aws regulating or gulations, and ord RMIT FEES, IM the roadside swan and closure of the een installed. Ta	onstruction and zoning. dinances, as well as the IPACT FEES, CAPTIAL rales, pavement, etc. Ane permit. No connection ampering fees may apply		
hereby acknowledge tha	egulating construction and at I have read and understand	and the above affida						
NAME (PLEAS	SE TYPE OR PRINT)	(SIGNATURE MUS	SIGNATURE C ST BE NOTARI		JNTRACTUR			
STATE OF	, COUNTY OF	·		_				
Sworn to (or affi	rmed) and subscribed befo	ore me this ersonally known or p						
as identification.		Exp. Date: Signature of No	Com tary Public:	mission Numb				