

APPLICATION FOR AVAILABILITY & PARCEL INQUIRY FORM

DATE: _____

WATER

SEWER

BASE MAP PAGE: _____
AS BUILT PAGE: _____
STR: _____
WATER TAP # _____
SEWER PERMIT # _____
ACCOUNT # _____

CHECK ONE SERVICE:

- _____ BASIC UTILITY AVAILABILITY (\$100 PER UTILITY) - ALLOW 10 BIZ DAYS
- _____ PRE-APPLICATION /CONCEPTUAL MEETING WITH ENGINEER (\$250.00)
- _____ ENG. AVAILABILITY, SKETCH& DESIGN QUOTE (\$1,000 PER UTILITY) - need paper & ACAD -allow 3-4 wks
- _____ HYDRAULIC / FIRE FLOW STUDY (\$1000 RESIDENTIAL / \$2,000 COMMERCIAL-MULTI FAMILY)

WHEN COMPLETE (CIRCLE ONE): MAIL OR CALL TO PICK UP

CONTACT NAME: _____ PHONE #: () _____

MAILING ADDRESS: _____ City and State: _____ Zip Code: _____

PROPERTY ADDRESS: _____ City and State: _____ Zip Code: _____

PARCEL # _____

NAME OF DEVELOPMENT: _____ LOT # _____ BLOCK # _____

DEVELOPMENT/BUILDING PLANS: _____ Proposed Single Family Home Describe: _____
 _____ Remodel/Addition to existing single family home _____
 _____ Lot Line Adjustment _____
 _____ Subdivision/Preliminary Plat _____ No. of lots / units: _____
 _____ Multi Family; Apts _____ Condos _____ No. of lots / units: _____
 _____ Commercial Building: Describe _____

CERTIFICATE IS REQUIRED FOR: _____ Building Permit _____
 _____ Short Subdivision (8 or less homes) _____
 _____ Preliminary Plat Submittal or PUD _____
 _____ Rezone or other: _____ Describe: _____

PROPERTY LIES WITHIN THE CITY OF _____ OR _____ IN UNINCORPORATED KING COUNTY.

*****BELOW FOR SCWSD OFFICE USE ONLY*****

WATER

DISTANCE FROM FRONTING MAIN _____
 DISTANCE FROM HYDRANT _____
 WATER MAIN SIZE _____
 SHORT OR LONG SIDED _____

WATER CHARGES

METER SIZE: _____
 SHORT OR LONG SIDED SERVICE CHARGE \$ _____
 GFC \$ _____
 SPU \$ _____
 LC OR SCC # _____ OR MAINLINE CONTRIBUTION _____ FF X 1/2 OR FULL INTERIM = \$ _____
 BACK FLOW (IF NECESSARY) \$ _____
 O.M.D x _____ YEARS = \$ _____ INTEREST: Y OR N 5% x _____ years = \$ _____

SEWER

DISTANCE FROM SEWER MAIN _____
SEWER CHARGES
 PERMIT \$ _____ GFC \$ _____ ROW. W. : Y or N \$ _____
 LC OR SCC # _____ OR MAINLINE CONTRIBUTION _____ FF X 1/2 OR FULL INTERIM = \$ _____
 O.M.D x _____ YEARS = \$ _____ INTEREST: Y OR N 5% x _____ years = \$ _____

MARK WITH PAID STAMP BELOW

PERSON RECEIVING INITIAL BELOW: