

DEPOSIT PAYMENT APPLICATION FOR ENGINEERING SERVICES PRELIMINARY WATER DESIGN



Please print legibly in ink.

CONTACT INFORMATION

DATE _____

APPLICANT _____

SELECT ONE Corporation Individual Partnership Other

If Other: _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ FAX _____

EMAIL _____

PROJECT NAME _____ LOCATION _____

JOB NO. _____ TRACT/PROJECT NO. _____

ENGINEER _____ RCE NO. _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE _____ FAX _____

FEE SCHEDULE

A non-refundable minimum charge in the amount of \$1,000.

DESCRIPTION

Initial design of the preliminary water system layout by the District:
To cover the actual costs incurred by the District in its design of the water system for the project:

FEE: AMOUNT DUE \$ _____

NOTE: This work will be accomplished on a time and effort basis. Should the District require more funds than the original charge, the additional costs will be billed and must be paid prior to allowing water and sewer service to the project.

ACCOUNT NO: _____ JOB NO: _____ TASK: _____

DISTRICT USE ONLY

Application Accepted by: _____ Date _____