

Water Availability Request Form

Please complete the front of this form and return both sides to our office for processing. Forms can be hand delivered, mailed or fax (both sides) to:

<p>Washington Water Service Company Office Location: 14519 Peacock Hill Avenue NW Mailing Address: P O Box 336 Gig Harbor WA 98335 Office: (877) 408-4060 Fax: (253) 857-4001</p>

1. I am the Property Owner Realtor Builder Future Property Owner Septic Designer
2. Type of Use: Residential Rural Residential Multi-Family Commercial Industrial
3. The letter is being used for: Property Sale Apply for an ADU Apply for Mother-in-law
 Confirmation of Service Availability Building Permit Application
4. **Property Information:**

Service Address:					
City		State		Zip	
Parcel Number:					
Lot Number & Legal Desc.	(Sample - Lot 1, SP # 00-00-00000 or Lot 1, Morningside West)				
Number of Conn's being Requested	Map must be attached if this is a proposed short plat or project for multiple lots.				

5. **Property Owners Information:** Must be completed for processing and should be legal owner of record

Property Owner's Name:					
Mailing Address:					
City		State		Zip	
Phone Number:		Fax Number:			

6. **Requesting Party Information:** I am the Realtor Builder Future Buyer Septic Designer:

Realtor/Builder/Buyer Name:					
Mailing Address:					
City		State:		Zip	
Phone Number:		Fax Number:			

Send Completed Form to: Property Owner Realtor Builder Future Buyer Septic Designer

Form Completed by: _____ Date: _____

Internal Company Use Only:

On Connection Summary Yes No _____

WWSC Acct #: _____

Approved for: _____

Base Map No: _____

Committed to: _____

Fire Flow Rating: _____

Active: _____ Hydrant Distance: _____ Main Size: _____

Map:	Attach WWSC Base Map and highlight property in Yellow.		
System Name:		System ID No.	
County:			
Abbreviated Lot # & Legal			

Form accepted by: _____ Date Completed: _____

Type of Request: Direct Connect Distribution Extension (Requires engineering review)

Review's Notes and Special Instructions:

Reviewed by: _____ Completion Date: _____