



CITY OF CAÑON CITY

Engineering Department

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WATER TAP APPLICATION

FOR CONNECTION TO WATER SYSTEM

(PLEASE PRINT)

DATE: _____ SIZE OF TAP REQUESTED: _____

USE: RESIDENTIAL SINGLE NON-RESIDENTIAL MULTI-UNIT # UNITS

PROPERTY OWNER NAME: _____

SERVICE ADDRESS: _____

BILLING ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

LEGAL DESCRIPTION OF PROPERTY TO BE SERVED: _____

Note: For taps larger than 1-inch, applicant will supply meter, meter pit, curb stop box (if applicable). For all services other than Single Family Residences a Testable Backflow Prevention Assembly is required and supplied by applicant.

SIGNATURE

OFFICIAL USE ONLY

Permit No. _____

(As a requirement of subdivision approval or tap approval)

WATER LINE EXTENDED OR ENLARGED/ AS-BUILT DELIVERED? YES NO N/A

PAYMENT MADE IN LIEU OF EXTENSION OR ENLARGEMENT? YES NO N/A

REBATE PAYMENT MADE? YES NO N/A

WATER SERVICE AGREEMENT REQUIRED & CONDITIONS MET? YES NO N/A

RECORDED PLAT RECEIVED? YES NO N/A

SIZE OF TAP APPROVED _____ WATER MAIN SIZE: _____

INSIDE OUTSIDE LPWD PUMP ZONE: I(A) I(B) I(C) II III

IMPACT FEE \$ _____ Notes: _____

REBATE FEE \$ _____

CASH-IN-LIEU FEE \$ _____

TAP FEE \$ _____

METER & PIT FEE \$ _____ **TOTAL FEE \$** _____

CITY ENGINEER _____ DATE _____ DATE PAID _____

WATER SUPERINTENDENT _____ DATE _____ RECEIPT # _____