

SNOWMASS WATER AND SANITATION DISTRICT
APPLICATION FOR CONNECTION PERMIT

Application Date: _____

Begin Construction Date: _____ End Construction Date: _____

Legal Description (Subdivision/Lot): _____

Service Address: _____

Applicant: _____ Phone: _____

Fax: _____

Mailing Address: _____

Owner: _____ Phone: _____

Contractor: _____ Phone: _____

Architect: _____ Phone: _____

Licensed Plumber: _____ Phone: _____

Description of Work: _____

District personnel will provide you with the specifications for the water and sewer lines, as well as the requirements for the plumbing installation involving the backflow prevention device, water meter and remote readout. It is the responsibility of the person who completes this application to deliver the specifications to the proper person(s).

For District use only:

Account No. _____ Permit #. _____

Plans by: _____ Increase (Decrease) EQR: _____

System Development Fee: Water \$ _____

Sewer \$ _____

Connection Permit Fee \$ _____

TOTAL FEE PAYABLE AT ISSUANCE: \$ _____