



# Utility Request Form

Building/ Lot Address, or Legal Description:

Parcel Number:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OWNER INFORMATION**

**APPLICANT/CONTRACTOR INFORMATION**

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_

Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Email Address \_\_\_\_\_

I/we, \_\_\_\_\_ (referred to herein as 'Customer') hereby submit to the Town of Palisade the following Development Fees as specifically required by the accompanying Planning Clearance for the property at

\_\_\_\_\_ to be occupied as a (circle one) RESIDENCE, BUSINESS, OTHER \_\_\_\_\_ legally described above. The Customer agrees as follows:

1. The Customer agrees to pay the Town for the privilege of water and sewer connection(s) in the sum of:\*

WATER		SEWER (Fees based on the size of water tap connection)		TOTAL FEES (Water + Sewer)
Size of Connection	Connection Fee Plus Labor & Materials	Size of Water Tap Connection	Connection Fee	
3/4 inch	\$6,350	3/4 inch	\$5,500	
1 inch	\$9,500	1 inch	\$8,500	
1 1/2 inch	\$13,722	1 1/2 inch	\$12,222	
2 inch	\$24,500	2 inch	\$22,000	
3 inch	\$54,500	3 inch	\$49,500	
4 inch	\$93,000	4 inch	\$88,000	

**\*Should the actual cost of installation exceed the minimum fee, the Customer will be billed the additional cost.**

2. Meter will be set within 30 days of planning clearance approval. From and after the date of the connection(s) of the premises with the Town water and/or sewer system(s), the Customer agrees that said monthly fee shall be added to their bill for water furnished by the Town to the above-mentioned premises and that the Town shall have the right to enforce payment of said water or sewer charge.

3. The Customer hereby agrees that any amounts due as monthly service charges which become ninety (90) or more days delinquent, said monthly charges shall become a lien against the property described herein, and the Town is authorized to file this application in the office of the County Treasurer as evidence thereof.

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## Utility Request Form (page 2)

**\*This form must be accompanied by the appropriate Planning Clearance and a plot plan showing the proposed connection, its size, and the size and location of all branches and facilities to be connected with it.**

Made at Town of Palisade, Colorado this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Print Customer Name

Customer Signature

Phone Number

Customer Mailing Address

Palisade Utilities Director Signature

### Information For Finance Office

All fees paid in full: \_\_\_\_\_

Receipt Date

Water Tap G/L: 004-000-3813

Sewer Tap G/L: 002-000-3822

Meter Parts & Labor G/L: 004-000-3815

Customer Account Number: \_\_\_\_\_

Route: \_\_\_\_\_

Sequence Number: \_\_\_\_\_

Meter ID Number: \_\_\_\_\_

Meter Number: \_\_\_\_\_

MXU Number: \_\_\_\_\_

Latitude: \_\_\_\_\_

Longitude: \_\_\_\_\_

Palisade Finance Signature