

## **Permit Application**

## **Professional Installation of Irrigation**

(using existing district water meter / no new billing account needed)

Resident Information	nformation Application Date:				
Home Owner Name:		Phone Number:			
Project Address:			_		
Installer Information	Company Name:				
Mailing Address:			Phone	Number:	
		Fax Number:			
Contact Name:					
Signature of Company Repre			_		
	THIS IS THE COMPAN TION FORM MUST BI				
Requirements					
All plumbing must comply was Any health hazards found in	ith the current Uniform I existing plumbing must b	Plumbing Code and repaired.	d TCEQ regulation	is.	
2 The tie-in and backflow inspector backflow test to the District.				igators responsibilit	y to provide a copy of the
3 If the prepaid plumbing inspection fees are due	ections fails, the above co 10 days after receiving bi	ompany will receive ill or service will b	e a bill for the re-in e terminated within	spections. Re-inspections. the District.	tion fees are \$ 105.00 each.
A set of plans of the system t the District prior to the final	o be installed must be suinspection.	bmitted with the p	ermit application.	Any revisions to the	plans must be submitted to
<b>NOTE:</b> To ensure contaminate every 5 years thereafter. All back a certified tester and a copy mus	flow devices that are ins	talled to protect a	gainst health hazard	l must be tested ann	ually. This is to be done by
De	scription	Fee	Unit	Total	
Applio	cation/Permit Fee	\$ 50.00	Each	\$50.00	
Plumb	oing Inspection Fee	\$105.00	Each	\$105.00	
	low Test (ONLY if led by District)	\$125.00	Each		
		Total Fees D	ue		
	This Se	ction is for C	Office Use On	ly	
Current copy of lice	ense & insurance / C	onfirm custom	er is same as lice	ense holder listed	on Bond List
Copy of plans, chec			Date Received		
DO NOT ISSUE PERMIT					Receipt Number
Turn in all paperwo		or approval			By