

RESIDENTIAL (1 lot)
APPLICATION FOR WATER SERVICE
LAKE GROVE WATER DISTRICT
4550 Kruse Way #360/PO Box 1173(Mailing Address)
Lake Oswego, OR 97035 # 503 636-1617

PROJECT ADDRESS: _____
DATE _____

ACCOUNT# _____

TO LAKE GROVE WATER DISTRICT: (Name and address of person making application)

NAME _____

ADDRESS _____

PH# _____

SERVICE ADDRESS: _____

Being the owner of the above described property within said district, hereby voluntarily requests that water service be installed at said property and in consideration of service, owner agrees to abide by, and shall require any tenants in said property, to abide by all Rules and Regulations of the district relating to the installation, testing and maintenance of service connections and use of the system..

Regular rates will be assessed against the property when the water service is installed.

BILLS WILL BE MAILED TO THE ABOVE NAME AND ADDRESS, UNLESS NOTED BELOW:
SEND BILL TO: _____

OFFICE USE ONLY

NON-REFUNDABLE

Review Fee required - allow 4 weeks for engineer to review plans (Hand out Rules&Regulations& Review Policy)

PART I

Deposit \$__1000.00__ (Pre-application) Check#_____ Office Initials_____

Plans Submitted __ YES__(1 set of plans required, will be returned)

Paid: Date: * APPLICANT SIGNATURE: _____

To Be Paid Upon Application

(After plans approved by Engineer, and before service can be installed SDF will need to be paid in full)

PART II

Allow 72 hours before meter installed**

System Development Fee \$ _____

Total \$

Paid : \$ Check# _____ Date: _____

*APPLICANT SIGNATURE: _____

*APPLICANT SIGNATURE _____ DATE _____

LAKE GROVE WATER DISTRICT _____ DATE _____

SIGNATURE: _____ ***REQUIRED**

(REV. 4/2013)