

## **City of The Dalles**

## **Utility Verification:**

Application #: _	
Filing Fee:	
Receipt #:	

REGOLATION	Sanitary Se	wer Service		Date Issued:					
Name:			Email:						
Phone:	Map and Tax Lot:								
Property Address (i	f vacant parcel,	attach map): _							
Nature of request:									
Residential:	Single-Family		Multi-Family	f Units _					
Commercial:	Business		Industrial	Industrial Type:					
Sewer Service Size:	4" (standard)		Other Size (inches):	:					
Irrigation Service:	Yes	No	Inside City Limits?		Yes	No			
Department Use Only	<u> </u>								
CONSENT TO ANNE	EXATION:	Required	Not Required						
REIMBURSEMENT	DISTRICT:	No	Yes District:						
SANITARY SEWER									
City Services: Cross Connection C			Main Size: p System – <u>Contact K.</u>				Inches		
All mainline extensions are the responsibility of the applicant and include engineering, plan preparation and construction.									
STORM SEWER									
City Services:	Available	Unavailable	Main Size:	Inches	Service	Size:	_ Inches		
All mainline extensions for commercial development or subdivisions are the responsibility of the applicant and include engineering, plan preparation and construction.									
Date of Information	າ:		Initials:		=				
Additional Information	tion:								
The System Develonew 4" (standard) s			e Family Residential D .00.	welling is \$	\$1,789.00	). The cost	to install a		
Commercial connections will be estimated at the cost of time and materials.									

Waste Water Signature Date: \_\_\_\_\_