



DEVELOPMENT SERVICES DEPARTMENT PROJECT FACILITY AVAILABILITY - POTABLE WATER

Please type or use pen

Owner's Name _____ Phone _____

Owner's Mailing Address _____ Street _____

City _____ State _____ Zip _____

ORG _____

ACCT _____

ACT _____

TASK _____ AMT \$ _____

DATE _____

W

DISTRICT CASHIER'S USE ONLY

SECTION 1. PROJECT DESCRIPTION

TO BE COMPLETED BY APPLICANT

- A. Major Subdivision (TM) Specific Plan or Specific Plan Amendment
 Minor Subdivision (TPM) Certificate of Compliance: _____
 Boundary Adjustment
 Rezone (Reclassification) from _____ to _____ zone.
 Development Permit, purpose: _____
 Use Permit, purpose: _____
 Time Extension/ Expired Map Case No. _____
 Other _____

Assessor's Parcel Number(s)
(Add extra if necessary)

- B. Residential Total number of dwelling units _____
 Commercial. Gross floor area _____
 Industrial Gross floor area _____
 Other Gross floor area _____

C. Total Project acreage _____ Total number of lots _____

- D. Is the project proposing the use of groundwater? Yes No
Is the project proposing the use of reclaimed water? Yes No

E. Applicant acknowledges that a copy of the Project Facility Availability for Fire Service is attached.

By signing below, the applicant acknowledges that the information provided is accurate and acknowledges that any significant modification of the proposed project may result in changes to the District's draft conditions/availability to serve.

Applicant's Signature: _____ Date: _____

Project Address: _____ Phone: _____

(On completion of above, present to the District that provides water protection to complete Section 2 below.)

SECTION 2: FACILITY AVAILABILITY

TO BE COMPLETED BY WATER DISTRICT

District Name: _____ Service area _____ Project Number: _____

- A. Project is in the district.
 Project is not in the district but is within its Sphere of Influence boundary, owner may apply for annexation.
 Project is not in the district and is not within its Sphere of Influence boundary.
 The project is not located entirely within the district and a potential boundary issue exists with the _____ District.
 Project DID DID NOT conduct a due diligence review with the water district.

- B. Facilities to serve the project ARE ARE NOT in the vicinity of the property. Explain in space below or on attached _____
_____. (Number of sheets attached _____)
 Project will not be served for the following reason(s): _____

- C. District conditions are attached. Number of sheets attached: _____
 District has specific water reclamation conditions which are attached. Number of sheets attached: _____
 District will submit conditions at a later date.

This Project Facility Availability Form is valid until final discretionary action is taken pursuant to the application for the proposed project or until it is withdrawn, unless a shorter expiration date is otherwise noted.

Authorized Signature: _____ Print Name _____

Print Title _____ Phone _____ Date _____

NOTE: THIS DOCUMENT IS NOT A COMMITMENT OF SERVICE OR FACILITIES BY THE DISTRICT

On completion of Section 2 by the District, applicant is to submit this form with application to:

Development Services Department - 1 Town Square, Merrieta, CA 92562