

Pine Island Community Development District
WATER AND WASTEWATER UTILITIES POLICY MANUAL

DEVELOPER CONNECTION APPLICATION FORM

THIS SECTION IS FOR DISTRICT PERSONNEL USE ONLY

Application Date _____		Time _____ AM/PM
Application Fee Paid: \$ _____	Connection Fees Paid: \$ _____	AFPI Charges Paid: \$ _____
Date Paid: _____	Date Paid: _____	Date Paid: _____
Check #: _____	Check #: _____	Check #: _____
Grinder Pump Fee Paid: \$ _____	Meter Install Fees Paid: \$ _____	Water Meter Size: _____
Date Paid: _____	Date Paid: _____	Irrigation Meter Size: _____
Check #: _____	Check #: _____	Lot Acreage: _____

TOTAL AMOUNT DUE: \$ _____

District Account # Given: _____

Anticipated Service Turn On Date: _____

Name of Person Taking Application: _____

Name of Person Receiving Payment: _____

Service Address: _____

Lot # or Legal Description (If No Address): _____

Applicant Info: (If a Business Please Provide Information for Authorized Representatives)

Name of Applicant: _____

Name of Authorized Representative: _____

Billing Address: _____ City/State: _____ Zip: _____

Telephone Numbers: Work: _____ Home: _____ Cell: _____

Approximate Occupancy Date(s): _____

Type of Structure: _____

Type of Use: Single-Family: _____ Multi-Family: _____

 Commercial: _____ Other: _____

Number of Buildings: _____ Sq. Ft. per build./unit: _____

Number of Units: _____ Potable Meter Size: _____

Lot Acreage: _____ Irrigation Meter Size: _____

(Lots on East side require 1" Irrigation Meters)

Applicable ERCs for Service: _____

Please refer to the District's Water Utilities Policy Manual for assistance with ERC Computation.

If you are applying on behalf of the owner or leaseholder of the service address, below please indicate the name, addresses and contact numbers for the owner and leaseholders and attach sufficient documentation to this application evidencing your right to apply to connect service to the service address including a copy of the lease if applicable:

Owner Name: _____

Owner Address: _____

Contact #s: _____ wk _____ hm _____ cell

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Lessee Name: _____
Lessee Address: _____

Contact #s: _____ wk _____ hm _____ cell

PROSPECTIVE DEVELOPERS ARE ADVISED THAT ALL SERVICE CONNECTIONS SHALL BE INSPECTED AND APPROVED BY BOTH THE LAKE COUNTY BUILDING DEPARTMENT AND THE DISTRICT AND THAT AT LEAST 48 HOURS NOTICE OF DESIRED INSPECTION TIME MUST BE GIVEN TO THE DISTRICT IN ORDER TO ACCOMMODATE SAME. FURTHER, IN ADDITION TO A CONNECTION FEE TO ESTABLISH A UTILITY CONNECTION TO A SERVICE ADDRESS, THERE MAY BE ADDITIONAL FEES CHARGED TO INSPECT A CONNECTION, FOR REVIEW OF PLANS, TO INSTALL A METER BOX AND OTHER CHARGES AND FEES IMPOSED IN CONNECTION WITH OTHER MISCELLANEOUS SERVICES PROVIDED BY THE DISTRICT WHICH SHALL BE BILLED AND PAID IN ACCORDANCE WITH THE 'WATER UTILITIES POLICY MANUAL' ADOPTED BY THE DISTRICT'S BOARD OF SUPERVISORS. A COPY OF THIS MANUAL SHOULD BE PROVIDED UPON PAYMENT OF THE APPLICATION FEE AND SHOULD BE READ AND UNDERSTOOD FULLY BEFORE ENGAGING THE DISTRICT'S UTILITY SERVICES.

APPLICANT'S SIGNATURE: _____

CO-APPLICANT'S SIGNATURE: _____