

CITY OF TAVARES
UTILITY CONNECTION APPLICATION
(For all connections outside the City Limits)



Please e-mail permits@tavares.org to process application

DATE: _____ ALT KEY: _____

SITE ADDRESS: _____

PARCEL ID NUMBER: _____

USE OF PROPERTY: _____

OWNER'S FULL NAME & ADDRESS *(list all owners & attach proof of ownership)*

_____ PHONE: _____

APPLICANT'S NAME & ADDRESS:

_____ PHONE: _____

APPLICATION FOR: _____ Water _____ Sewer

METER SIZE: _____ IRRIGATION METER: YES _____ NO _____ SIZE _____

For Office Use Only:

AVAILABILITY: Water: YES NO Sewer: YES NO

LOCATION ID: _____

FEE ASSESSMENT:

Water Impact: _____

Sewer Impact: _____

Backflow Device: _____

Utility Deposit: _____

_____ Meter Fee: _____

Other Fees: _____

Total Fees: _____

CREDIT ADJUSTMENT:

Pioneer-Water *: _____

Pioneer-Sewer *: _____

*Name of Pioneer Agreement:

Total Credits: _____

Grand Total Fees Due: _____

APPLICANT'S SIGNATURE: _____