

NON-STANDARD SERVICE APPLICATION

PLEASE PRINT OR TYPE

Applicant/Company Name: _____

Billing Address/City/State/Zip Code: _____

Service Address of Meter (911 Address): _____

Phone Number: (____) _____ - _____ **E-Mail:** _____

Please attach a legal description of the proposed development as listed in deed records as a filed plat or parcel of land where other types of non-standard water service are requested. Plat requirements include: name of subdivision, owner/developer's name, lot sizes and lot lines, lot numbers, right of way dimensions and dedicated utility easements, legal description, highway and county road numbers, total acreage, adjoining property owners, flood plain, and vicinity map. Instrument must show proof of ownership; preliminary plats are acceptable for discussion purposes but an "approved plat" must be provided before contract closing.

Check type of service application or development:

- Residential Subdivision Multi-Family Mobile Home Park Trailer Park School Line Extension
 Commercial/Industrial Park Large Meter (>1") Multi-Use Facility Other

Please list all water demand criteria for each meter or meter equivalent, or attach any engineering studies completed for the proposed service:

Acreage: _____ **Maximum # of proposed lots:** _____ **Range of standard lot sizes:** _____

Please describe in detail the nature and scope of the project/development:

Initial needs: _____

Phased and final needs, including a map showing each phase, and the projected land uses that support the requested level of service for each phase:

Please list any additional special service needs not listed above: _____

Please provide the flow, pressure and infrastructure needs for anticipated level of fire protection requested or required by ordinance, including line sizes and capacity:

Please provide the timeline for initiation of this service, and for service to each additional or projected phase following initial service, including a schedule of events leading up to the anticipated date of service. Specify this for all additional or projected phases:

SOUTH ELLIS COUNTY WATER SUPPLY CORPORATION
P.O. Box 348/109 West Main Street Italy, TX 76651 (972) 483-6885

Please describe how the utility may access the property during evaluation of application:

Please attach the following information, as applicable:

- A proposed calendar of events, including design, plat approval, construction phasing and initial occupancy.
- If applying for a single tap that requires a line extension, road bore, or upsizing of facilities, maps or plans detailing the location of the requested service installation and/or extension and details of demand requirements.

Required Fees

Applicant is required to pay a Non-Standard Service Investigation Fee to the Corporation in accordance with Section G of the Corporation's Tariff for purposes of paying initial administrative, legal, and engineering fees. The Corporation will refund any balance that remains after it has completed its service investigation, and has completed all legal and engineering services associated with processing a request.

In the event the Investigation Fee is not sufficient to pay all expenses incurred by the Corporation, the Applicant agrees to pay all additional expenses that have been or will be incurred by the Corporation and Corporation will have no obligation to complete processing of the Applications until all remaining expenses have been paid.

Nonstandard Service Investigation Fees shall be \$500.00 for Single Meter Applications, and \$3,000.00 for Multiple Meter/Developer Applications.

Corporation's response to service request

The Corporation will prepare a written response to Applicant's service request within 90 days from the date the application was submitted and the required fees were paid. The Corporation's response will state the timeframe within which the requested service can be provided, and the costs for which the Applicant will be responsible, which may include capital improvements, easements or land acquisition costs, and professional fees.

Applicant has received and reviewed Section F of the SECWSC's Tariff and agrees to comply with all the requirements contained therein.

Under penalties of perjury, I declare that I have reviewed the information presented in this Application, including accompanying documents, and to the best of my knowledge and belief, the information is true, correct and complete.

Print Applicant/Name of Company

Signature of Authorized Representative

Date

For Corporation Use Only	
_____ Date Application Received	_____ Date Approved
_____ Amount of Fees Paid	_____ Date Paid
_____ Account #	_____ Certificate #
_____ Signature SECWSC Staff Member	