

City of DeLand – Building and Inspection Department
121 West Rich Avenue, DeLand, Florida, 32720
(386) 740 - 5769



UTILITY ACCT

COMMENTS:

	Date sent	Date ret'd
Water Dept	/ /	/ /
Sewer Dept	/ /	/ /
Planning Dept	/ /	/ /

Building and Inspection Department to complete Section 1 and Section 2

WATER/SEWER SERVICE APPLICATION

SECTION 1

Application Submittal Date: / / Requested Meter Installation Date: / /
Type of Service Requested: Water Sewer Sprinkler (Original Water Service Connect Date: / /)
Circle Account Type: 1-Residential 2-Commercial 3-Exempt 4-Multi-Family 5-Sprinkler 6-Taxed School
8-Hotel/Motel 9-Mobile Home Meter Size: ¾" 1" 1½" 2" 3" 4" 6" 8" 10"

SECTION 2 - Owner or Builder Information If owner is applying, has builder already applied? Yes No

Name: Mailing Address:
Telephone: () - Fax: () - email:
Service Location: Lot#: Parcel #: - - - Subdivision:

SECTION 3 - Water Department Information for Water Service Only – NO SPRINKLER

Water Service Available: Yes No Line Extension Needed: Yes No Extension Cost: \$
Fire Line Installed: Yes No If YES, size of fire line: 4" or less 6" 8" 10"
Approved By: Approval Date: / /

SECTION 4 - Sewer Department Information

Sewer Service Available: Yes No Lateral Already Exists: Yes No Extension Cost: \$
Approved By: Approval Date: / /

SECTION 5 - Planning Department Information

Service Address within: City County Contiguous: Yes No
Approved By: Approval Date: / / Total Fees Due: \$0.00

If service address is outside the City, provide a copy of the annexation petition and/or covenant.

FEE CALCULATION AND COLLECTION RECORD

Covenant Processing Fee	Fire Impact Fee	Explanation of Credit:
Meter Deposit	Police Impact Fee	
Water Connection Fee	County Impact Fee	
Water Line Extension Fee	Impact Fee Credit (if applicable)	
Water Impact Fee		
Sewer Connection Fee	TOTAL FEES DUE:	Credit Approved By:
Sewer Line Extension Fee		
Sewer Impact Fee		Receipt # Date: / /

Customer Accounts Rep. Finance Department Date: _____