## AUSTIN COUNTY WATER SUPPLY CORPORATION NONSTANDARD SERVICE APPLICATION

Applicant's Name/Company	
Address/City/State/ZIP:	
Phone number ()	FAX ()
E-mail	
plat or parcel of land who requirements include the na numbers, right of way dime county road numbers, tota Instrument must show proof	tion of the proposed development as listed in the deed records as a filed the other types of nonstandard water/sewer service is requested. Plat time of subdivision, owner/developer's name, lot sizes and lot lines, lot ensions and dedicated utility easements, legal description, highway and l acreage, adjoining property owners, flood plain, and vicinity map. of ownership; preliminary plats are acceptable for discussion purposes but provided before contract closing.
Check type of service applic  ☐ Residential Subdivision  ☐ Line Extension  ☐ Multi-use Facility	□Multi-family       □Mobile Home Park       □Trailer Park       □School         □Commercial/Industrial Park       □ Large Meter (>1")
Please list all water demand studies completed for the pro-	criteria for each meter or meter equivalent, or attach any engineering oposed service:
Maximum number of propos	sed lots: Range of standard lot sizes:
Acreage(s)	

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.
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 Nonstandard Service Investigation Fee of \$\_\_\_\_\_\_ 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.

## 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 <u>Section F</u> of the Corporation'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	For Corporation Use Only
	Date application received
Signature of Authorized Representative	Amount Fees Paid / Date Paid
Date	Signature WSC staff member