UTILITY REQUEST APPLICATION FORM

DATE _____

City use only Application Number _____   Building Permit Number: _____

LEGAL DESCRIPTION OF SITE: APPLICANT INFORMATION:

Street Address: _____   Property Owner Name: _____

Sarasota County PID#: _____   Company Name: _____

Subdivision Name: _____   Mailing Address: _____

Lot & Block No. _____ City: _____ State: _____ Zip: _____

Email Address: _____   Phone Number: _____

TYPE OF BUILDING <u>TO BE</u> SERVED BY CITY UTILITIES *(check one)*

Family-Residential   Multi-Family Residential   Commercial   Multi-Use

UTILITY SERVICE REQUESTED   *(check all desired even if property currently is served with all or some)*

Domestic Water   Irrigation Water   Reclaimed Water   Fire System Water   Sanitary Sewer

<u>QUESTIONS *(please answer all)*</u>:

Is the property located within the City of Sarasota?	YES	NO	NA
If not, are you applying for *Annexation within the City of Sarasota* for the purpose of obtaining City Utilities?	YES	NO	NA
Is there an existing connection to the City water system?	YES	NO	NA
Is there an existing connection to the City sewer system?	YES	NO	NA
Is there an existing reduced pressure backflow prevention device located at the meter?	YES	NO	NA
Is the building served by a dedicated fire line?	YES	NO	NA
Is there an existing building on the property?	YES	NO	NA
Is the existing building being demolished?	YES	NO	NA
If the building is to be demolished, is a new building to be constructed?	YES	NO	NA
If not demolished, is the existing building to be remodeled?	YES	NO	NA
If not demolished, is the existing building being expanded (constructing an addition)?	YES	NO	NA
Does/Will the property have a well or non-potable water irrigation system?	YES	NO	NA
Does/Will the property have a potable water irrigation system?	YES	NO	NA
Does/Will the property have a swimming pool?	YES	NO	NA
Does/Will the property have a fire protection system or a tall building of five or more floors?	YES	NO	NA

I (print name) _____ **am the legal owner of the property described above and have the**

legal authority to execute this application form and I attest the information provided on this form is true and accurate.

SIGNATURE: _____   **DATE:** _____