

WASTEWATER ALLOCATION APPLICATION

In accordance with the City of Havelock Board of Commissioners approval of Chapter 52, Wastewater Disposal, Section 52.079 Sewer Allocation Limitations Policy, and subsequent amendments.

APPLICANT SECTION

<input type="checkbox"/> New Account <input type="checkbox"/> No-Flow Account <input type="checkbox"/> Re-activation <input type="checkbox"/> Other: _____	
Applicant <i>(Tenant/Property Owner/Developer):</i>	Application Date:
Business/Development Name <i>(If Applicable):</i>	
Specific Site Address:	Phone:
<input type="checkbox"/> Residential-- # of Bedrooms _____ <input type="checkbox"/> Commercial : See below	
Commercial Use	
<input type="checkbox"/> Barber, Beauty Shop, etc. # of Chairs _____ <input type="checkbox"/> Business- # of Employees _____	
<input type="checkbox"/> Churches, Restaurants, etc. # of seats _____ <input type="checkbox"/> Day Cares, Camps, Swimming Pools, etc.	
<input type="checkbox"/> Motels/Hotels - # of Rooms _____ # of persons _____	
<input type="checkbox"/> Rest & Nursing Homes, Hospitals # of Beds _____ <input type="checkbox"/> Service Stations, etc. # of water closets/urinals _____	
<input type="checkbox"/> Stores, Shop Cntr, etc, retail area. _____ sq ft <input type="checkbox"/> Airports/RR station/Bus stop - # of passengers _____	
<input type="checkbox"/> Bowling Lanes # of lanes _____ <input type="checkbox"/> Campground- # of sites _____	
<input type="checkbox"/> Travel/recreational Vehicle prk # of spaces _____ <input type="checkbox"/> Country Club- # of Members _____	
<input type="checkbox"/> Factories- # of persons/per shift _____ <input type="checkbox"/> Schools- # of Students _____	
<p>EXPIRATION: All allocations will expire <u>one hundred and eighty (180) days</u> from receipt of an allocation if construction has not commenced; commencement is defined as installation of footings for each building receiving an allocation. All allocations, where construction is not applicable, will also expire if a business has not commenced operations within one hundred and eighty (180) days.</p>	
By signing here you acknowledge you have read and understand the expiration statement and this form:	Applicant's Signature: X _____

WATER DEPARTMENT

Acct Type: <input type="checkbox"/> Active <input type="checkbox"/> Inactive (Since ___/___/___) Allocation Needed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utility Billing: New Account: Does this application require a Water/Sewer System Development Worksheet? <input type="checkbox"/> Yes <input type="checkbox"/> No City Water <input type="checkbox"/> City Sewer <input type="checkbox"/>
Customer Service Supervisor: _____

CITY SECTION

Planning/Building Dept Recommended amount: _____ G.P.D.	City Manager/Planning Director Amount Authorized: _____ G.P.D.
City Manager/ Planning Director Signature: _____ Date: _____	