CITY OF LYNN HAVEN

Water/Sewer/Irrigation/Reclaimed Water Availability Request

Staff Member Requesting _____

THIS FORM IS TO BE USED TO DETERMINE THE AVAILABILITY OF CITY WATER, SEWER, IRRIGATION AND RECLAIMED WATER SERVICES. ALLOW A SEVEN (7) DAY RESPONSE TIME FROM THE RECEIPT OF THIS REQUEST. PLEASE ANSWER ALL QUESTIONS TO THE SITE LOCATION, AS INCOMPLETE FORMS MAY RESULT IN DELAYS. **ALL BACKFLOW DEVICES TO BE SUPPLIED BY THE CONTRACTOR.**

REQUESTOR: _____DATE: _____
ADDRESS or COMPANY: _____
PHONE: _____CELL: _____FAX: _____

□ PROPERTY OWNER □ REAL ESTATE AGENT
□ PROSPECTIVE BUYER □ OTHER

□ WATER AVAILABILITY □ SEWER AVAILABILITY
□ WATER AVAILABILITY FOR IRRIGATION METER
□ RECLAIMED WATER AVAILABILITY FOR IRRIGATION

SITE LOCATION

ADDRESS_____
BLOCK NUMBER:_____LOT NUMBER:_____

Date Reported:_____ By:_____

Water available to site: □ Yes □ No Sewer available to site: □ Yes □ No
¾" Irrigation available: □ Yes □ No 1" Irrigation available: □ Yes □ No
Reclaimed water available: □ Yes □ No

□ **County Water** □ **City Water**

SPECIAL SITUATIONS

_____
_____
_____

Water Location Sewer Location

_____
_____
_____
_____
_____
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