

LAKESIDE COUNTY WATER & SEWER DISTRICT PERMIT
406-844-3881

(For all new services or existing services changing use or volume discharge)

Date Applied For: _____ **Date Meter Picked Up:** _____ Account: _____

Applicants Name: _____ Tel. No. _____

Job Address: _____

Billing Address: _____

Property Owner if Different: _____

Type of Service: Single Family _____ Multiple Family _____ Commercial _____

Permits Required: Right of Way - Flathead County Road Dept. _____
Right of Way - Montana Dept. of Highways _____
MT State Plumbing - (supplied) _____

Required Items:
Water Meter: Yes ___ No ___ Backflow Preventer: Yes ___ No ___ Developer Reimbursement: Yes ___ No ___
(With remote readout) Meter Box with Flow Meter, check valve & shut-off: Yes ___ No ___

Type of Service: _____

| | <u>SEWER FEES</u> | <u>WATER FEES</u> | |
|---|--------------------------|--------------------------|---|
| 1. Water meter Size: _____ | | | |
| 2. Permit & Inspection Fee | \$ _____ | \$ _____ | Payment Info. Date: _____ Ck. #: _____ Amt.: _____ |
| 3. Plant Investment Fee-Reserved Capacity | \$ _____ | \$ _____ | |
| 4. Plant Investment Fee-Expanded Capacity | \$ _____ | \$ _____ | |
| 5. Water Tap Parts/Supplies, Water Meter | \$ _____ | \$ _____ | |
| Total | \$ _____ | Total \$ _____ | |

Contractor's Name and Address _____

Contractor Insurance on File: Yes _____ No _____ Contractor Bond: Yes _____ No _____

LCWSD Main-Line inspection: Performed By: _____ Date: _____

Comments: _____

Installation Requirements: Individual **Sewer** connections shall utilize 4" SDR 35-SD Poly Vinyl Chloride pipe. Gasketed pipe is preferred. Minimum depth of bury is 18" (inches). Completion of line connection is subject to mandatory inspection by LCWSD personnel during regular business hours, 8-5 Monday through Friday. **Provide sketch of service connection on back to show main line connection.** All permits are the responsibility of the applicant. Warranty of installation is property owner/contractor responsibility. Any person(s) performing water and sewer excavation must have proof of insurance on file at the LCWSD office. All **Water** services require a District standard meter pit arrangement with meter, backflow prevention device and curb stop installed. These items are to be paid for by the customer and the ownership will be that of the District. Meter Pit is demarcation point. Abandoned or terminated services must be capped or plugged in an approved manner in order to prevent harms to the systems.

Signature of applicant: _____
Sketch of Installation on Back

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SKETCH OF CONNECTION

INSPECTION CHECK LIST:

1. Depth of Bury _____
2. Connection Integrity _____
3. Saddle & Tap Installation _____
4. **No** Galvanized Materials _____
5. Proper bedding around main line _____

OFFICE CHECK LIST:

- | | |
|-------------------------------------|--|
| 1. _____ Permit Issued | 12. _____ Permit filed in "Uncompleted File. |
| 2. _____ UBS Account # established. | 13. _____ a. Billing Started- File Permit in Permanent Location. |
| 3. _____ Tax I.D. # _____ | 14. _____ b. Billing Deferred- File Permit in Uncompleted File. |
| 4. _____ Meter # _____ | 15. _____ Check "Uncompleted" File <u>Monthly</u> . |
| 5. _____ Meter Brand _____ | 16. _____ Accounts Database. |
| 6. _____ Meter Size _____ | 17. _____ Inspection Completed. |
| 7. _____ Meter Routing # _____ | 18. _____ Initial "0" Meter Reading Established in UBS |
| 8. _____ SN _____ TN _____ RN _____ | |
| 9. _____ Tract # _____ | |
| 10. _____ Acreage _____ | |
| 11. _____ Subdivision _____ | |