

SITE ID AND SERVICE REQUEST FORM

PLEASE PRINT

Date: _____ Residential Commercial

Single Multi-unit Modular/Manufactured Home

Owner/Builder: _____ Account# _____

Phone #: _____ Cell# _____

Address of Service
Requested: _____

Electrician's Name: _____ Plumber's Name: _____

Contact Person(If Different from above): _____

I request the City of Llano install _____ tap at the above address

X _____
Signature Required

Building

Manufactured Home: Specific Use Permit Number _____

Submitted Plans: Permit Number _____

Approved By: _____ Date: _____

Electrical

Cost Worksheet

200 Amp Over 200 Amp _____

Single Phase Three Phase _____

Above Ground Underground _____

Up Grade _____

Temporary _____

Extension Required _____ ft _____

Existing Tap Total Estimated Cost _____

Characteristics (I.E. 100A, 120/240V, 1P 3W): _____

Approved By: _____ Date: _____

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Water Service Request

(Customer Section)

Type: Residential Commercial Irrigation Other _____

Size: 5/8x3/4 1 1.5 2 Other _____

(Office Use Only)

Tap Size Available: _____

Backflow Prevention Required: Yes No Extension Length(in feet) _____

Other Requirement: _____

Comments: _____

Tap Cost: _____

Extension Cost: _____

Water Tap Total: _____

Approved by: _____

Date: _____

Wastewater Service Request

(Customer Section)

Type: Residential Commercial

Size: Standard Other _____

(Office Use Only)

Service Available: 4" Gravity Flow 2" Pressure Other _____

Extension Length(in feet) _____ Check Valve Required: Yes No

Other Requirements _____

Comments: _____

Tap Cost: _____

Extension Cost: _____

Wastewater Tap Total: _____

Approved by: _____

Date: _____