



CITY OF PORT ORANGE
DEPT OF COMMUNITY DEVELOPMENT
BUILDING DIVISION

UTILITY CONNECTIONS
(For New Residential Development)

ADDRESS: _____

1) WATER/SEWER CONNECTIONS

WATER

SEWER

SEPTIC TANK (CHECK ONLY IF SEWER NOT AVAILABLE)

*

2) IRRIGATION TYPE:

RECLAIMED (IF AVAILABLE)

WELL

POTABLE WATER

3) HAS THERE EVER BEEN A STRUCTURE ON THE PROPOSED LOCATION?

YES (IF YES, PROVIDE DOCUMENTATION)

NO (IF NO, SKIP QUESTIONS 4 AND 5)

4) IS THERE AN EXISTING WATER SERVICE?

YES

NO

5) IS THERE AN EXISTING SEWER LATERAL?

YES

NO

IMPORTANT:

IT IS THE RESPONSIBILITY OF THE DEVELOPER/CONTRACTOR/OWNER TO ESTABLISH AN ACCOUNT FOR WATER, SEWER, AND/OR RECLAIMED SERVICES WITH THE CUSTOMER SERVICE DEPARTMENT, LOCATED ON THE FIRST FLOOR OF CITY HALL

Signature of Applicant

Date:

FOR OFFICE USE ONLY

DATE:

PERMIT TECHNICIAN: