

TOWN OF WEAVERVILLE
WATER DEPARTMENT

APPLICATION FOR A COMMITMENT LETTER

NAME OF APPLICANT: _____

PROJECT NAME: _____

ADDRESS: _____

LOCATION: _____

PHONE NO: _____

PIN NO: _____

TYPE OF SERVICE:

ELEVATION: _____

- RESIDENTIAL
- SINGLE FAMILY HOME
 - TWO FAMILY _____ NO. OF BUILDINGS
 - MULTI - FAMILY _____ NO. OF BUILDINGS _____ UNITS PER BUILDING
 - RESIDENTIAL SUBDIVISION _____ NO. OF LOTS

- COMMERCIAL
- SINGLE COMMERCIAL BUILDING
 - UNIFIED BUSINESS DEVELOPMENT _____ NO. OF BUILDINGS _____ NO. OF UNITS

- INDUSTRIAL
- SANITARY FACILITIES ONLY
 - SANITARY & INDUSTRIAL PROCESS WATER

- OTHER
- FIRE SPRINKLER SYSTEM
 - IRRIGATION SYSTEM
 - _____

CAPACITY REQUESTED:

MAXIMUM GALLONS PER MINUTE _____

MAXIMUM GALLONS PER DAY _____

ANTICIPATED DATE OF SERVICE _____

PROJECT DESCRIPTION:

By way of Attachment(s) provide as much information as possible about this project. At minimum, attach a copy of the County Tax map showing the location of the property. If the project involves a subdivision or more than one building location, a topographic map of the property is required to show building or lot elevation.

ACKNOWLEDGMENT

I _____ understand that the processing fee of \$ 35.00 , paid herewith, is non-refundable and is to cover the costs of processing and investigating this request and that an additional Commitment Fee based on the size and number of connections is due upon approval. It is further understood that the Town has the exclusive right to deny the request for any reason whatsoever.

SIGNATURE _____

DATE _____

Town of Weaverville
P. O. Box 338
Weaverville, NC 28787
(828) 645-7116