



# CITY OF SARASOTA - NEIGHBORHOOD AND DEVELOPMENT SERVICES

## -UTILITY COST ESTIMATE APPLICATION-

**Return to:** Engineering Division, 1565 1st St. Sarasota, FL 34236 – Ph. 365-2200 ext 4375, Fax: 954-4178

**Mail checks payable to:** City of Sarasota – Mail to: (P.O. Box 3439) Sarasota, FL. 34230

**Make Payments in person to:** Public Works – 1761 12<sup>th</sup> Street – Office located on First floor

Please fill out **Yellow Section** to the best of your knowledge

<b>Address:</b>		<b>Date:</b>	<b>QS Map #:</b>
<b>Legal Description Required</b>		<b>Applicant Information</b>	
Sarasota County PID #		Owner Name:	
Lot:	Block:	Company Name:	
Subdivision:		Address:	
Is property located in the City?      Y      N		City:	State:      Zip:
If no, have you applied for annexation? Y      N		Cell #	Home #
<b>Utility Services Requested</b> (√, number, size/inch)			
<input type="checkbox"/> Single-Family	<input type="checkbox"/> Domestic Water Meter	No. _____	Size _____
<input type="checkbox"/> Multi-Unit # _____	<input type="checkbox"/> Irrigation Water Meter	No. _____	Size _____
<input type="checkbox"/> Commercial	<input type="checkbox"/> Fire Line	No. _____	Size _____
<input type="checkbox"/> Multi-Use	<input type="checkbox"/> Sanitary Sewer Service	No. _____	Size _____
	<input type="checkbox"/> Reuse	No. _____	Size _____
<b>Description of Utility Locations Requested</b> (description, or n/a)			
<b>WATER:</b>		<b>SEWER:</b>	
<b>REUSE:</b>		<b>IRRIGATION:</b>	
<b>FIRELINE:</b>			
To the best of my knowledge, the above information is correct _____			
<b>(Applicant Signature)</b>			
<b>FOR CITY USE ONLY</b>			
<b>CONDITIONS FOR SERVICE</b>			<b>ESTIMATED COST</b>
<input type="checkbox"/> FDEP Permit Approval Water <input type="checkbox"/> Sewer <input type="checkbox"/>			<b>Water:</b> _____
<input type="checkbox"/> Construction by applicant: Service line to utilities:			<b>Sewer:</b> _____
<input type="checkbox"/> Back Flow Device Required: RPZ: ____ DDC: ____ DC: ____			<b>Reuse:</b> _____
<input type="checkbox"/> Utility Deposit and Administrative Processing Fee Required			<b>Deposit:</b> _____
<input type="checkbox"/> Other:			<b>Serv. charge:</b> _____
<input type="checkbox"/> Separating meters from:			<b>TOTAL:</b> _____
Approved By _____		Date: _____	Application No: _____