

Mid Valley Metropolitan District
0031 Duroux Lane, Suite A - Basalt, CO 81621
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Business Hours: Monday - Friday, 9:00 a.m. - 3:00 p.m.

**APPLICATION FOR WATER AND SEWER SERVICE AND TAP PERMIT --
SINGLE-FAMILY, RESIDENTIAL, SECONDARY
RESIDENTIAL, DUPLEX AND SPECIAL CLASSIFICATIONS**

Please complete and return to Mid Valley Metropolitan District

Name of Applicant: _____

Address: _____

Phone: (H) _____ (W) _____ (Fax) _____

(Cell) _____ (Email) _____

Service desired: Water _____ Sewer _____

Owner of Property to be Served: _____

Address: _____ Phone: _____

Street Address of Property to be Served: _____

Subdivision or Development: _____ Block/Lot: _____

Structures on Property (if there is more than one structure of the same type, give separate information for each):

	<u>SFD & Duplexes</u>	<u>ADU</u>
Bedrooms:	_____	_____
Kitchens:	_____	_____
Bathrooms	_____	_____
Square feet of Irrigated Green Space:	_____	_____
Other water uses or structures (e.g.hot tubs, swimming pools, fountains)	_____	_____

Number of EQRs Required, per District EQR Schedule: _____

Number of Prepaid EQRs to be applied to this tap: _____

Owner of Prepaid EQRs: _____

Address: _____ Phone: _____

NOTE: Attach a copy of the document which assigns the prepaid tap to you. Unless attached, no credit for the prepaid tap will be granted.

Number of free EQRs to be applied to this tap: _____

Owner of free EQRs: _____

I, the applicant named above, as lawful owner of the property described above or on behalf of the lawful owner, hereby apply to Mid Valley Metropolitan District for the privilege of water and/or sewer service pursuant to §6.03 of the District's Rules and Regulations. I certify that the above description of the property to be served, and the structures thereon, is accurate. I understand that I must have the new tap inspected by District representatives and hereby consent to an inspection of the premises at a reasonable time and in a reasonable manner for the purposes of approving the tap and verifying the tap fee to be charged. I agree to give the District 24 hours notice before such an inspection is needed. I understand that service charges begin to accrue from the date of physical connection. I agree to abide by the Rules and Regulations of the District as set by the Board of Directors and amended from time to time, and to notify the District of any changes in the structures or water uses described in this application.

Applicant _____ Date _____

OFFICE USE ONLY

Copy of water and sewer policy given? _____ Rules & Regulations offered? _____ EQRs _____

Tap fee paid: Water \$ _____ Date _____ Received by _____

Sewer \$ _____ Date _____ Received by _____

Inspection Deposit \$ _____ Date _____ Received by _____

Water rights dedicated? _____ Surcharge paid \$ _____

Application approved (becomes a tap permit): Date _____ By _____

Account number assigned _____ Inspection scheduled for _____

Comments _____
