Q.S. #_____

W.S. ACCEPTED DATE

CIRCLE APPROPRIATE SELECTION

INSIDE CITY / OUTSIDE CITY ASKED CWA Y N

EXISTING SEWER Y N PRESSURE ZONE _____

CITY OF PHOENIX, ARIZONA
WATER SERVICES DEPARTMENT

NEW SERVICE WORKSHEET

DATE _____

TOTAL $ _____

RECEIVED FROM_____ CHECK # _____

Q.S. # DIM TO MAIN	WATER / SEWER LOC. OF MAIN	WW MAIN DEPTH SIZE & TYPE MAIN	APPLICATION #		SERV. SIZE	SERVICE ADDRESS	LOT #	BLDG. OR PLUMBING PERMIT #
				A				
				B				
				C				
				D				
				E				
				F				
				G				
				H				
				I				
				J				

METER USE _____ CODE _____ NO. OF UNITS PER SERVICE _____

REPAY. AGREE # _____ AMT. _____

W.O. # _____ | _____ | _____

TAX PV / MC / COP _____ @ _____

CONST. ACCESS _____ @ _____

METER / TAP ONLY _____ @ _____

FULL SERVICE _____ @ _____

SEWER TAP _____ @ _____

FIRELINE / WET TAP _____ @ _____

WATER RESOURCE _____ @ _____

WATER DEVELOP _____ @ _____

SEWER DEVELOP _____ @ _____

SHUTDOWN _____ @ _____

MAPS / OTHER _____ @ _____

SPECIAL REMARKS _____

SERVICE CITY _____ SERVICE ZIP CODE 85 _____

LEGAL DESCRIPTION _____

WATER CUSTOMER NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE ( ) _____

PRINT REPRESENTATIVE NAME _____

PAVEMENT SURCH. Y N DIS # _____ RECEIPT # _____

PAID ON PERMIT # _____ | _____ | _____

PROJECT _____

APPROVED BY _____ DATE PRINTED _____

SHADED AREA FOR OFFICE USE ONLY

PLEASE PRINT LEGIBLY