

415 Old Austin Hwy., Drawer P Bastrop, TX 78602 512-303-3943 Fax: 512-303-4881

www.aquawsc.com

REQUEST FOR FEASIBILITY STUDY

		APPLICAN ⁻	T INFORMATION	N			
Today's Date		Account Number	Account Number				
Applicant Name(s)			Telephone Number	Telephone Number (Daytime)			
Street Address	City		State		Zip Code		
E-Mail Address							
PROPERTY INFORMATION							
Aqua Zone Map Page		Parcel Identification			Acreage of Property		
Property Owner Name(s)	-				·		
Property Location and/or Legal Description	n						
		DEVELOPME	NT INFORMATIO	N			
Development Name							
☐ Residential		☐ Commercial			□ Other		
Number of Lots		Number of Structures		тот	TOTAL NUMBER OF REQUESTED LUE'S		
WATER REQUIREMENTS							
Estimated Water Demand		Irrigation Requirements		Fire	Fire Flow Requirements		
Additional Information							
SIGNATURE							
The Developer will pay for all the development necessary to System Development fee for valid for 90 days from the issue	o provide s each resid	sufficient water se dential/commercial	rvice to the develo	opment. İı	n addition, the Developer w	vill pay a	
Applicant must accompany a			tv Studv with:				
☐ Feasibility Study Fee (see	• •		et of site plans and	d/or □	Proof of Ownership by De	eed	
Tariff)		Preliminary Plat			(if applicable)		
Applicant (Print Name)			Signature				