



Small Town. Real Life.

Public Works Department
14525 Main Street NE
P.O. BOX 1300
Duvall, WA 98019
(425) 788.3434

OFFICIAL USE ONLY

Permit Number: _____
Date Received: _____
Received By: _____
Related Permit Number: _____

CITY OF DUVALL SEWER SERVICE APPLICATION

☐ Residential Service

☐ Multi/Res. Service

☐ Business/Commercial Service

Application is hereby made for permit to do the following work at:

Address _____

Plat Name _____ Lot _____ Blk . Div. _____

Outside Dimensions of Building to be Served: _____

Description for Location of Buildings on Property: _____

Owner _____ Address _____ Phone _____

Contractor _____ Address _____ Phone _____

Contractor's License No. _____

Application Date: _____ Signed _____

Permission is hereby given to do the above-described work, according to the approved plans and specifications thereto, subject to compliance with Ordinance No. 209 of the City of Duvall.

Permit Issued Date _____ By _____

****SUBMIT AS-BUILT WHEN WORK COMPLETED AND APPROVED****

SEWER EXTENSION/CONNECTION FEE ESTIMATE

OFFICIAL USE ONLY

Completed By: _____
Checked By: _____
Applicant Name: _____
Service Address: _____

Permit Number: _____
Date: _____
Phone: _____

Property Description

☐ Unplatted: Assessor's Parcel # _____ Sec. _____ T. _____ R. _____

☐ Platted: Lot _____ Block _____ Plat No./Name _____

General Location _____ Water System Pressure Zone No. _____

Type of Use: _____

Existing well on property? ☐ No ☐ Yes, Explain _____

Outside City: ☐ No ☐ Yes, Power of Attorney for Annexation Required

Equivalent Residential Units (ERU): _____

☐ **Sewer Extension:** Description _____

☐ **Connection:** Description _____

☐ **ULID** ☐ No ☐ Yes

☐ **Backflow Valve Required** ☐ No ☐ Yes

☐ **Side Sewer Permit*** \$ _____/unit

☐ **Comp Sewer Plan or DPW Line** ☐ No ☐ Yes, Explain _____

☐ **Future Latecomers Possible** ☐ No ☐ Yes, Explain _____

☐ **Latecomer Agreement**:** ☐ No ☐ Yes

LCA # _____ Explain _____ \$ _____/unit

LCA # _____ Explain _____ \$ _____/unit

☐ **General Facility Charge**** ☐ No ☐ Yes \$ _____/ERU

☐ **Special Connection:** Footage Change ☐ No ☐ Yes \$ _____/LF

☐ **Latecomer Agreement**** ☐ No ☐ Yes

LCA # _____ Explain _____

LCA # _____ Explain _____

WATER EXTENSION/CONNECTION FEE ESTIMATE

☐ **Design and Construction** - Private Consultant and Contractor by Owner/Applicant**

Plan Check Fee \$_____ + _____ LF @ \$0._____/LF \$_____/unit

☐ **Inspection** - City of Duvall**

Inspection Fee \$_____ + _____ LF @ \$0._____/LF \$_____/unit

Street Use Permit

☐ No Yes \$_____/unit

Restoration of New Street ☐ No ☐ Yes, Explain _____

☐ **Stormwater Facility Charge**** ☐ No ☐ Yes \$_____/unit

☐ **Right-of-Way or Easements** ☐ No ☐ Yes, Explain _____

TOTAL \$_____/unit

Comments: _____

*Due and payable at the time of building connection to the system.

**Due and payable prior to construction or final plat approval.

Fees calculated for the month of _____, 20_____.

NOTE: This estimate is prepared with the best available information. The City reserves the right to update this estimate at any time as required.