

APPLICATION FOR SEWERAGE SERVICE

DATE RECEIVED: \_\_\_\_\_

1. OWNER'S NAME: \_\_\_\_\_

USE ADDRESS: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

2. Description of property to be served: \_\_\_\_\_

3. Intended Use:

Single Family Residential

Multi-Single Family Residential

Multi-Family Residential

Commercial

Industrial

Other (describe) \_\_\_\_\_

4. Number of equivalent future units related to service \_\_\_\_\_  
(To be completed by District based on plans provided by the Applicant)

5. Capacity Rights Fee \$ \_\_\_\_\_ (to be established by District)

6. Have you received, or had opportunity to read, a copy of the Sewerage Ordinance of the District?

Yes       No

7. Is this application for a single-family dwelling unit where single-family is defined as "a man, woman, their unmarried children, minor grandchildren, parents of the man and/or woman and any minor children over which they have legal guardianship"?

Yes       No

8. Will more than one single-family, where single-family is defined as "a man, woman, their unmarried children, minor grandchildren, parents of the man and/or woman and any minor children over which they have legal guardianship" occupy this dwelling unit?

Yes       No

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I hereby request sewerage service from the CUTLER PUBLIC UTILITY DISTRICT and agree to pay all costs associated with physical connection to the sewerage system, capacity rights charges, monthly charges, as well as any penalties and charges levied to reestablish disconnected service.

I agree to observe all rules, regulations and ordinances adopted by the Board of Directors of the CUTLER PUBLIC UTILITY DISTRICT and the State and County DEPARTMENTS OF HEALTH SERVICES and the STATE WATER RESOURCES CONTROL BOARD.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. Executed on \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_, California.

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Owner

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Application Number

Cutler Public Utility District  
40526 Orosi Drive  
Cutler, CA 93615  
559/528-3859