



## REQUEST FOR COMMERCIAL SERVICE

Project Name: \_\_\_\_\_ Project Number: \_\_\_\_\_

Service Address: \_\_\_\_\_

Development Name: \_\_\_\_\_ Lot #: \_\_\_\_\_

Block Map Reference #: \_\_\_\_\_

Type of Business: \_\_\_\_\_

**BILLING INFORMATION:**

Business Name: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Property Manager: \_\_\_\_\_ Phone #: \_\_\_\_\_

**For SJWD Office Use**

Number of Units: _____	Type: R C I	Meter Size: _____	Tap Size: _____
Line Size: _____	Line Type: _____	Short Side: _____	Long Side: _____
Inside District: _____	Outside District: _____	Fire Line Size: _____	

**SPECIFICATIONS:**

**FEES:**

System Improvement Fee: \_\_\_\_\_

Water Meter: \_\_\_\_\_

Water Tap: \_\_\_\_\_

Irrigation Tap: \_\_\_\_\_

Fire Line Tap: \_\_\_\_\_

Other: \_\_\_\_\_

**TOTAL FEE DUE:** \$ \_\_\_\_\_

SJWD Account # _____	SJWD Location #: _____
Date Paid: _____	Receipt Number: _____
Check Number: _____	