



# PUBLIC WORKS DEPARTMENT

## Water, Sewer, & Stormwater Application

Date Received: \_\_\_\_\_

Date Notified: \_\_\_\_\_

<b>Completed by Customer</b>	Property Owner: _____									
	Builder: _____									
	Address: _____									
	_____									
	_____									
<b>Contact Person / On-Site Review</b>										
Name: _____									Phone Number: _____	
Email: _____									_____	
Comments:										
Please include type and size of service(s) requested in the comments section.			_____							
_____			_____							
_____			_____							
<b>Completed by City of Dublin</b>	<b>WATER</b>			<b>SEWER</b>			<b>STORMWATER</b>			
	Desc.	Size/LF	Price/LF	Desc.	Size	Price/LF	Desc.	Size	Price/LF	
	Labor			Labor			Labor			
	Pipe			Pipe			Pipe			
	Meter			Tap			Street Cut			
	Meter Box			Road Bore			RCP			
	Valve			Street Cut			CMP			
	Valve Box						ADS			
	Dual Check									
	RPZ Check									
	Tap									
	Road Bore									
	Street Cut									
	<b>WATER SUBTOTAL</b>			<b>SEWER SUBTOTAL</b>			<b>STORMWATER TOTAL</b>			
To be provided by Engineering Department Staff Only										
<b>CAPITAL RECOVERY FEE:</b> _____						<b>GRAND TOTAL:</b> _____				

**THIS ESTIMATE IS VALID FOR 30 DAYS FROM THIS DATE:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Email completed application to [bakery@dublinga.org](mailto:bakery@dublinga.org) or Fax to [\(478\) 272-2073](tel:4782722073)