



PERMIT #: _____

LOC I.D.: _____

**CITY OF VENICE
WATER / SEWER SERVICE REQUEST
CAPACITY FORM**

**** ONCE FEES ARE PAID, CONTACT UTILITIES AT 941-480-3333
OR UTILITIESSERVICES@VENICEGOV.COM TO MAKE NOTIFICATION THAT LOCATION IS
READY FOR METER. METER WILL NOT BE SET UNTIL NOTIFICATION HAS BEEN RECEIVED**

PROPERTY ADDRESS:		LOT #:	
SUBDIVISION:			
OWNER:		PHONE:	
CONTRACTOR:		PHONE:	

NUMBER OF UNITS:	TYPE OF STRUCTURE:		
_____ Units	<input type="checkbox"/> Commercial	<input type="checkbox"/> Multi-Unit	<input type="checkbox"/> Residential

NEW/EXISTING:	<input type="checkbox"/> New Service	<input type="checkbox"/> Existing Service
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SIZE OF METER REQUESTED:	_____ inch(s)	NUMBER OF METERS REQUESTED:	_____
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METER TYPE:	<input type="checkbox"/> Water	<input type="checkbox"/> Reclaim	<input type="checkbox"/> Irrigation ↴ Is this a "Y" off service? <input type="checkbox"/> Yes <input type="checkbox"/> No
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SEWER CONNECTION:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> City Sewer <input type="checkbox"/> County Sewer
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Signature of Owner / Contractor

Date

***** UTILITIES OFFICE USE ONLY *****

A. PLANT CAPACITY FEES: Per City of Venice Ordinance Chapter 74 (Article II Sec 74-72 & Article III 74-162)			
	Fee:	Credit:	TOTAL
Water	\$	\$	\$
Sewer	\$	\$	\$
B. TAP FEES: Per City of Venice Ordinance Chapter 74 (Article I Sec 74-4)			
Water	<input type="checkbox"/> Long tap <input type="checkbox"/> Short tap		\$
Reclaim	<input type="checkbox"/> Long tap <input type="checkbox"/> Short tap		\$
Sewer			\$
TOTAL AMOUNT DUE:			\$

Signature of Utilities Representative

Date

Fax form to Utilities at 486-2758 for processing

Revised 12/23/15