



**BILLABLE APPLICATION**

Name of Project: \_\_\_\_\_

Former Name(s): \_\_\_\_\_

Assessor's Parcel Number(s): \_\_\_\_\_

Site Address: \_\_\_\_\_

Name of Owner(s) of record: \_\_\_\_\_

\_\_\_\_\_

Names of ALL Development Partners, Corporations, Interested Parties:

\_\_\_\_\_

\_\_\_\_\_

Project Manager/Partner (to whom billings will be sent):

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Brief Description of the Project:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Developer and/or Owner acknowledges that the preparation of an agreement to provide service to this project will be based upon the information contained within this application and documents provided by the Developer. The Developer agrees to place a deposit with the District in the amount of \$1,000.00 per utility to begin the development process. Charges against this deposit will include, but are not limited to the following:

- Meetings with Developer or Project Representative
- Legal and/or Engineering Consultant expenses
- Review and/or preparation of easements, agreements or other documents
- Telephone conversations with Developer or Project Representative
- Copies of District Standards, Blueprints

The Developer and/or Owner will be responsible for the payment of all expenses incurred in the review process. If the expenses exceed the deposit, the Developer agrees to pay invoices for all additional work performed, upon receipt. The Developer will only be charged for those expenses related to the project. If the Developer fails to pay such expenses on a timely basis, the District may decline to provide service or may terminate service. Any excess deposit will be refunded to the Developer.

I agree to the terms and conditions herein stated.

\_\_\_\_\_  
Developer (*Printed Name*)

\_\_\_\_\_  
Developer (*Signature*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner (*Printed Name*)

\_\_\_\_\_  
Owner (*Signature*)

\_\_\_\_\_  
Date

**PROJECT ELECTRIC REQUIREMENTS**

(Each structure requires a separate page)

**Structure Name/Number:** \_\_\_\_\_

**Number of units in structure:** \_\_\_\_\_

**Size of main service disconnect and/or panelboard:** \_\_\_\_\_ amps \_\_\_\_\_ voltage and phase (see list below)

**Will the structure be served by:**

Single meter:  Multiple meters:  Number of Meters: \_\_\_\_\_  
House Meters: \_\_\_\_\_

**Size and quantity of individual services:**

- a) 100 amp  \_\_\_\_\_ d) 400 amp  \_\_\_\_\_ g) 1000 amp  \_\_\_\_\_
- b) 200 amp  \_\_\_\_\_ e) 600 amp  \_\_\_\_\_ h) \_\_\_\_\_ amp  \_\_\_\_\_
- c) 300 amp  \_\_\_\_\_ f) 800 amp  \_\_\_\_\_ i) \_\_\_\_\_ amp  \_\_\_\_\_

**Meter Information:**

- 120/240 volts, 3 wire, 1 Ph
- 120/208 volts, 3 wire, 1 Ph
- 120/208 volts, 3 wire, 2 Ph Network
- 120/208 volts, 4 wire, 3 Ph
- 277/480 volts, 4 wire, 3 Ph

**Load Information:**

1 Phase

3 Phase

General Load \_\_\_\_\_

\_\_\_\_\_ KW

Lighting Load \_\_\_\_\_

\_\_\_\_\_ KW

Motor Load \_\_\_\_\_

\_\_\_\_\_ KW (HP)

HVAC Load \_\_\_\_\_

\_\_\_\_\_ KW

Other \_\_\_\_\_

\_\_\_\_\_ KW

**Totals** \_\_\_\_\_

\_\_\_\_\_ KW

If available, please provide copies of detailed load calculations including one-line diagrams and/or panelboard schedules with load information.

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

**PROJECT WATER REQUIREMENTS**

(circle the appropriate selection or enter the specific information)

**RESIDENTIAL USES**

Will project include residential units? Yes  No

Number of residential units: \_\_\_\_\_

Will ownership of units be maintained as? Individual owners  Single owner   
of all units

Will single family detached residential units Yes  No   
be limited through deed restrictions to square  
footages of 3600 or less

Maximum demand for individual residential  
Units \_\_\_\_\_ gallons per minute (gpm)

Type of metering: Master  Individual

Master meter size: 5/8" x 3/4" - 3/4" - 1" - 1-1/2" - 2"  
\_\_\_\_\_ gallons per minute (gmp)

**NON-RESIDENTIAL USES**

Will project include non-residential units? Yes  No

Number of non-residential units: \_\_\_\_\_

Will ownership of units be maintained as? Individual owners  Single owner   
of all units

Maximum demand for individual non-  
Residential units \_\_\_\_\_ gallons per minute (gpm)  
(provide a separate sheet for multiple units)

Type of metering: Master  Individual

Master meter size: 5/8" x 3/4" - 3/4" - 1" - 1-1/2" - 2"

**LANDSCAPE IRRIGATION SYSTEMS**

Will project have a landscape irrigation system? Yes  No

Maximum demand for the irrigation system: \_\_\_\_\_ gallons per minute  
(gpm)

Irrigation system to be served from separate meter: Yes  No

**FIRE SPRINKLER SYSTEMS**

Will project have a fire sprinkler system? Yes  No

Maximum demand for the fire sprinkler system: \_\_\_\_\_ gallons per minute (gpm)

**FIRE HYDRANT SYSTEMS**

(as determined by the TRUCKEE FIRE PROTECTION DISTRICT)

Maximum fire flow \_\_\_\_\_ gallons per minute (gpm)

Duration of fire flow \_\_\_\_\_ minutes

Submitted by: \_\_\_\_\_ Date: \_\_\_\_\_

Depending on the project, plans and specifications may need to go to the State Health Department for approval. District staff will determine whether this step is required and complete the information below.

<p><b>Truckee Donner Public Utility District Staff Only</b> <input type="checkbox"/> <input type="checkbox"/></p> <p>Will Plans and Specifications need review/approval by State Health Department?</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>T.D.P.U.D. Staff Signature: _____ Date: _____</p> <hr/> <p>Project Representative Notified?</p> <p>T.D.P.U.D. Staff Signature: _____ Date: _____</p>
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**Truckee Donner Public Utility District  
CONTRACTING FIRM DATA SHEET  
Electric**

Name of Development: \_\_\_\_\_

Name of Developer: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

California Contractor's License Number: \_\_\_\_\_

**CONSTRUCTION SCHEDULING**

Estimated date construction to commence: \_\_\_\_\_

Estimated date construction to complete: \_\_\_\_\_

Please provide any information which may be beneficial to the District relative to the construction scheduling:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONTRACTING FIRM DATA SHEET**  
**Water**

Name of Development: \_\_\_\_\_

Name of Developer: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

California Contractor's License Number: \_\_\_\_\_

CONSTRUCTION SCHEDULING

Estimated date construction to commence: \_\_\_\_\_

Estimated date construction to complete: \_\_\_\_\_

Please provide any information which may be beneficial to the District relative to the construction scheduling:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Truckee Donner Public Utility District  
REQUEST FOR STATEMENT OF SERVICE AVAILABILITY**

Assessor's Parcel Number (s): \_\_\_\_\_

Name of Project: \_\_\_\_\_

Developer: \_\_\_\_\_

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

Project Site Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

**PLEASE SEND LETTER OF SERVICE AVAILABILITY TO:**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

\_\_\_\_\_

Name: \_\_\_\_\_

Company: \_\_\_\_\_

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

\_\_\_\_\_