Single Family Residence
Project Data Sheet

Date Submitted: _________  Submitted By: _____________________

Name of Project: _______________________________________________

Assessor’s Parcel Number(s): _______________________________________

Site Address: ____________________________________________________

Owner:

Name: __________________________________________________________

Address: ________________________________________________________

Phone: _________________________________________________________

Fax: ___________________________________________________________

Email (if available) _____________________________________________

Project Representative (to whom correspondence will be sent):

Name: __________________________________________________________

Address: ________________________________________________________

Phone: _________________________________________________________

Fax: ___________________________________________________________

Email (if available) _____________________________________________
PROJECT INFORMATION

SIZE OF RESIDENCE: __________ square feet of living space

MAXIMUM DOMESTIC DEMAND: __________ gallons per minute

FIRE SPRINKLER SYSTEM TYPE
(Glycol, Gas Charged, etc.) ________________________________

HEATING SYSTEM TYPE
(Forced Air, Hydronics, etc.) ________________________________

Upon submittal of this document, the District shall review the availability of fire flow to the project site and respond in writing.

All projects shall be subject to the District’s requirements regarding backflow prevention and cross-connection control. The District may require additional information and/or field inspections to determine compliance with the backflow prevention requirements. The District shall have complete authority regarding the determination of adequacy of the existing water system facilities.

I agree to the terms and conditions herein stated.

_______________________________________________
Owner/Project Representative (Printed Name)

_______________________________________________                ________________
Owner Owner/Project Representative (Signature)                 Date