Ave Maria Stewardship Community District APPLICATION FOR IRRIGATION SERVICE

Type of Service: Residential General Connection Fee: \$10.00

Applicant Information:			
Applicant Name:			
Billing Address:	str		
City:			Apt./Unit No. Zip Code:
Phone Number:			
Email:			
Social Security Number or Tax Identif	ication Number*:		
*Residential Service applicants may also subm	nit a copy of their driver's license	e in lieu of this information.	
Service Location:			
Service Address:		street name	
Subdivision:			: Pages:
Block Number:	Lot Number:		_Unit Number:
Service Information:			
Requested Meter Size*: 1" 1-1/	2" 2" 3" 4"	6" 8" Other	:
Service Irrigable Area:	square feet		
Estimated Demand:	gallons per minute (du	uring hours of operation	on)
General Service Applicants shall sub	bmit three (3) set of const	ruction documents (pl	ans and specifications).
* Residential Services cannot be larger than 1'	unless waived by AMSCD		
	(To be completed b	y AMSCD)	
Meter ID No:	Size: in.	Service Start Date:	
ERT No:		Service End Date:	
Account Number:		Deposit Amount:	\$
Approved By:			