



FORT BEND COUNTY W.C. & I.D. NO. 2
2331 South Main, Stafford, Texas 77477
Phone: (281) 499-2041 Fax No.: (281) 499-4223

APPLICATION FOR SANITARY SEWER AND/OR WATER SERVICE

 (NAME OF APPLICANT) (LOT) (BLOCK) (SECTION)

 (SERVICE ADDRESS) (CITY) (STATE) (ZIP)

PLUMBER/CONTRACTOR/IRRIGATOR: _____
 (Name) (Phone)

E-Mail: _____

TYPE OF PIPE MATERIAL: WATER: _____ SEWER: _____
 (Schedule 40 or SDR 26)

INSTALLATION OF: Sample Well: _____ Grease Trap: _____ Size Trap: _____

Irrigation System: _____ Size Meter: _____ Backflow Device: _____

Swimming Pool: _____ Repair of Line: _____ New Line: _____

Multi-Tenant Build-Out: _____ Other: _____

DATE: _____ REQUESTED BY: _____
 (Signature)

INSPECTION FEE: \$ 50.00 (For each trip)

APPLICANT SHOULD SUBMIT CONSTRUCTION PLANS/PLAT, SHOWING LAYOUT AND PROPOSED LOCATION OF SEWER AND/OR WATER SERVICE LINE, INCLUDING CLEANOUT LOCATIONS, AND IF APPLICABLE, SAMPLE WELL, GREASE TRAP, BACKFLOW DEVICE, ETC.

INSPECTION PAID BY:
 NAME: _____

ADDRESS: _____

APPLICATION APPROVED: _____

Date: _____

FOR DISTRICT USE ONLY

CONNECTION INFORMATION:

(District Inspector will indicate the following on construction plans/plat)

Service Lines: _____ Cleanout Locations: _____ Sample Well: _____
 Grease Trap: _____ Irrigation System: _____ Backflow Device: _____
 Dates of Inspections: _____

CERTIFIED BY: _____ **DATE:** _____
 (District Inspector)