CITY OF PORT ORCHARD
Public Works Department
216 Prospect Street, Port Orchard, WA 98366
Voice: (360) 876-4991 • Fax: (360) 876-4980
www.cityofportorchard.us

APPLICATION FOR WATER AND/OR SEWER CONNECTION PERMIT

☐ SIDE SEWER PERMIT and/or (CHECK THE APPROPRIATE BOX)
Length of property line(s) adjacent to road right of way. _____ ft. **(REQUIRED)**

☐ WATER PERMIT
Meter size for building meter _____ Meter size for irrigation meter _____ **(REQUIRED)**

Please Note: If the referenced property is within ULID#1 you may be entitled to a credit. To apply for a credit you must submit a written request (with a copy of the Title Report showing the property is within ULID#1) at the same time you submit this Water/Sewer connection permit form. The City will review your request and determine if you are entitled to a credit. ***No request for ULID#1 credit will be accepted after water/sewer connection permit (this form) has been received by the City.***

Print (use ink) or Type

Date of Application:_____

Assessor's Account Number:_____

Owner's Name:_____

Owner's Address:_____

Email (Preferred Method of Contact)_____

Phone #_____ Fax #_____

Proposed Site Address and Location:_____

☐ Single Family Residence ☐ Multi Family (number of units _____), or

☐ Other (please describe)_____

Builder's Name and Address: _____

Side Sewer Contractor:_____

Address:_____Phone: _____

L & I Contractor's License No:_____City License No:_____

_____/_____
Owner's Signature Print Name

DO NOT WRITE BELOW THIS LINE

_____/_____
RECEIPT NO. FEES COLLECTED BY (To be filled in by Treasurer's Office)