

Project Property Address: \_\_\_\_\_ City Planning & Zoning Coordinator: Crystal R. Ball, CFM Email- <u>cball@lovington.org</u> Phone: (575) 396-9301

## **City Water/Sewer Connection Permit**

The following check list provides additional requirements for your specific application. Please attach all of

the requested documentation, sign, and date.

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## **Permit Requirements**

- <u>Submit a completed Planning and Zoning Application</u>. All fields must be completed and legible in order to process the application. This document provides the basic information required for all permitting applications.
- Pay the applicable Water/Sewer Connection Permit processing fee(s). \$
   Date paid\_\_\_\_\_\_
- 3) <u>Provide proof of ownership or interest in the property.</u> A deed with a legal description or property lease will meet this requirement. If the applicant is not the owner, an Affidavit by Property Owner(s) is required.
- Submit a site plan. Site plans must show the property lines, building dimensions, lot area, lot dimensions, easements, building setbacks, road access points, and the location of utilities.
- For Sewer Connections, submit a statement as to the size of the connection and type of materials to be discharged into the sewer.
- 6) <u>For Water Connections, submit a statement</u> as to the size of the meter and the purpose for which the water is required (i.e. residential use, car wash, etc.).
- 7) <u>Call 8-1-1 BEFORE YOU DIG</u>- to locate buried utility lines.
- 8) <u>Pay the applicable fee for the required water meter.</u> \$\_\_\_\_\_ Date paid
- 9) <u>A final inspection is required</u> after the Wastewater Connection to ensure the installation meets City standards. Water connections are performed by the Water Department and therefore do not require an inspection.

Connection Type(s): Water 
Sewer

Service Address:	
Applicant Name:Date:	
Applicant Signature:	

Notes or recommendations to applicant from Planning & Zoning, Code Enforcement, or City Staff.

## Preliminary Approval Planning, Zoning, Code Staff Name:\_\_\_\_\_ Signature: Date: Sewer Superintendent Name:\_\_\_\_\_ Date: \_\_\_\_\_ Superintendent Signature:\_\_\_\_\_ Water Superintendent Name:\_\_\_\_\_ Date: Superintendent Signature:\_\_\_\_\_ **Final Inspection** <u>Sewer</u> Inspector Name:\_\_\_\_\_ Date: \_\_\_\_\_ Inspector Signature: