



**APPLICATION FOR
WATER/WASTEWATER SERVICE**
CITY OF OLDSMAR- PLANNING & REDEVELOPMENT
100 STATE STEET WEST, OLDSMAR, FL 34677-3655
PHONE: (813) 749-1100
EMAIL: PLANREDEV@MYOLDSMAR.COM

PERMIT NO. _____
 PERMIT FEES DUE: \$ _____
 RECEIPT NO: _____
 DATE: _____

Total Amount Rec'd _____ Credit Card Authorizatfon _____

Residential: Commercial: Irrigation: METER SIZE: _____

Legal Description: Sec. 25, Twnshp. 28, Rng. 16, Subdivision 18432, Blk. 001, Lot 0140

Property Address: (348) SHORE DR. E

Owner or Authorized Representative: Richard G. Deeb

Mailing Address: 9400 River Crossing Blvd Phone: 727 3766831

New Port Richey Email: DUANE@deebfamilyhomes.com

6th EDITION (2017) FLORIDA PLUMBING CODE APPLIES

IRRIGATION METERS ONLY: Irrigation meters will be placed next to present meter only. Appointment cannot be made for installation. Homeowner will be responsible for installing systems to meter.

If commercial, complete the following:

Name of Firm: _____

Mailing Address: _____ Phone Number: _____

Person Responsible for Bill: _____

Signature: _____

TO BE COMPLETED BY THE CITY

METER SIZE: _____ DATE: _____ WORK ORDER NO: _____ RECEIPT NO: _____

Water Impact Fee: _____ Sewer Impact Fee: _____

Water Connection: _____ Sewer Connections: _____

Meter Installation: _____ Security Deposit: _____

Approved by Utilities Superintendent: _____

Approved by Water Department Supervisor: _____

Meter number: _____ Installed: _____ Square Foot Bldg: _____

This building will be sprinkled: Yes: _____ No: _____

Is there a fire hydrant on this property: Yes: _____ No: _____ Number of ERU's: _____