

## 2024

## Plan Review Request for Impact Fee-Commercial

Please return form to the office or email to: PLANCHECK@MTREGIONAL.ORG

Account #:		Date:		nte:
Subdivision:		Plat:	I	.ot:
Customer or Property Owners				
Service Address:				
Mailing Address:				
City:	State:	Zip:	Phone:	
Email:				
	4" 1" 1-1/2"		Existing Meter	Multiple Meter
Water line infrastructure is be	ing revised in any way: YF	ES NO	If yes, additional plans are reengineering department	equired to be sent to the
Гуре of Business:				
Capacity, Seating or Occupancy				
Number of Employee(s) / Staff:				
rrigation Landscape Area (	sq. ft.):			
All Commercial conn	nections are required (annual test repor			stic Water Line
MUST be su	landscape plan which clearly il ubmitted along with the house post construction irrigated land	plans. Please enter	r the developed irrigated a	
(includ	** Plan Review Fee is \$100 ing change(s) of data or incomplete data			
Applicant Signature:			Da	ate:
Applications submitted and Fees quoted are only good until the end of the calendar year in which requested				

Terms of Agreement: Applicant agrees to pay the water service fees and other charges imposed for water delivered to the Customer and to comply with the Uniform Rules and Regulations for the Distribution of Water for Mountain Regional Water Special Service District as they now exist or as they are amended in the future.