



# EAST ORANGE COUNTY WATER DISTRICT SEWER CONNECTION APPLICATION

## CONTACT INFORMATION

Date: \_\_\_\_\_ Application No: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

Connection Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Major Cross Streets: \_\_\_\_\_

Parcel Number/APN (if known): \_\_\_\_\_

## TYPE OF DEVELOPMENT – Please provide two (2) sets of preliminary plans

- Single Family Residence  
Existing: No. of Bedrooms: \_\_\_\_\_  
New: Proposed No. of Bedrooms: \_\_\_\_\_
- Multi-Family Residence  
Existing: No. of Units: \_\_\_\_\_  
Existing No. of Bedrooms/Unit: \_\_\_\_\_  
New: No. of Units \_\_\_\_\_  
New: No. of Bedrooms/Unit \_\_\_\_\_
- Commercial/Industrial  
Type of Use (e.g. restaurant, retail, etc.) \_\_\_\_\_  
Existing: square footage: \_\_\_\_\_  
New: Proposed square footage: \_\_\_\_\_

## ADDITIONAL COMMENTS

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