



UTILITY SERVICE PRE-CONNECTION Application

APPLICANT INFORMATION:

Property Owner Name:	Company:	
Mailing Address:	City:	Postal Code:
Phone:	Email:	

Personal information you provide on this form is collected pursuant to Section 26 of the *Freedom of Information and Protection of Privacy Act* and will only be used for the purpose of processing this application. Your personal information will not be released except in accordance with the *Freedom of Information and Protection of Privacy Act*. Questions about the collection of your personal information may be referred to the Corporate Services Coordinator by email: duncan@duncan.ca or phone: 250-746-6126.

UTILITY SERVICE INFORMATION

Service Location Address:			
Project Name:		Anticipated Date of Occupancy:	
<input type="checkbox"/> Single-Family Residential	<input type="checkbox"/> Multi-Family Residential	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
Details of Development:			
No. of Existing Residential Units:		No. of Proposed Residential Units:	
No. of Existing Commercial Units:		No. of Proposed Commercial Units:	
Existing Commercial Sq. Ft.:		Proposed Commercial Sq. Ft.:	

Pre-connection application requests are subject to fees as per the Fees and Charges Bylaw. Please indicate which service below.

Curb Cut (includes driveway installation and relocation)	<input type="checkbox"/>	\$475.00 (note: this fee covers analysis of curb, sewer, storm and water combined)	Paid Stamp
Sewer	<input type="checkbox"/>		
Storm Drain	<input type="checkbox"/>		
Water	<input type="checkbox"/>		
Pavement Replacement	<input type="checkbox"/>	N/C	
Sidewalk Replacement	<input type="checkbox"/>	N/C	

DECLARATION:

I understand that this is only an application for service and that the City of Duncan may not be able to provide the service(s) requested, depending on the circumstances. In the event the City of Duncan cannot provide services, a portion of the pre-application fee may be refunded. I understand that after Public Works determines the estimated costs of these services that I must make a deposit payment prior to the installation being scheduled. The date of installation may be as much as eight (8) weeks after payment is made. I understand that if I have not paid the deposit within two weeks after Public Works has calculated the deposit and other applicable charges that the deposit and charges may be subject to increase.

Registered Owner/Authorized Agent	Signature	Date
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NOTE: Completing this application form does not guarantee approval. Your application will be reviewed and you will be contacted.

OFFICE USE ONLY:

Reviewed by Public Works (Signature)	Approved by Ops MGR or Director (Signature)	Date
Project Number:	Water Study Required? Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> Original Application to Ops MGR
COPIES:	<input type="checkbox"/> Dir. PW & DS	<input type="checkbox"/> Account CLK
	<input type="checkbox"/> Utilities Foreman	<input type="checkbox"/> Building Inspector (City)
	<input type="checkbox"/> Utility Billing CLK	<input type="checkbox"/> Engineering Tech