

# WASTEWATER

REVIEW

FOR

## SINGLE BUILDING PERMIT



# City of Leavenworth

### APPLICANT INFORMATION / INSTRUCTIONS

APPLICANT'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

HOMEOWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_ PARCEL NUMBER: \_\_\_\_\_

PURPOSE OF REQUEST: \_\_\_\_\_

**\*\*A legible map of the property, showing the general location, including street frontage and nearest cross-street **must** be attached\*\***

### FOR DEPARTMENT USE ONLY

COUNTY FILE # \_\_\_\_\_

DATE OF COMPLETED APPLICATION: \_\_\_\_\_ WASTEWATER SYSTEM: \_\_\_\_\_

### WASTEWATER MAY BE AVAILABLE IF THE PROPERTY OWNER MEETS THE FOLLOWING CONDITIONS

Such listing is not intended to be an exhaustive list of all conditions which may be required in order to provide service. Other facts may be revealed during subsequent review which require new or changed conditions be met by the property owner prior to service. An application for connection is required to be approved by the City prior to connection to the City's wastewater service:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approval does not constitute or imply future mainline extension and/or connection to the City of Leavenworth wastewater system. Permitting will be required at the time of development

The conditions of water availability stated within this form expire within one (1) year of the water system personnel's signature date. A new water availability form shall be resubmitted after this date to confirm water availability.

This checklist was prepared to help applicants comply with the requirements of RCW 19.27.097, concerning the adequacy or inadequacy of the local water system's ability to serve the referenced property. The information provided is intended to summarize the water system's capacity and the required improvements, if any are needed to provide water service.

Ability to provide service per this form assumes availability of 1 (one) ERU

- I. Capacity to provide service
  - \_\_\_ a. The property is within the designated Wastewater System service area and the System has sufficient capacity to serve this property.
  - \_\_\_ b. Service to this property is **not available** from the Wastewater System at this time. To serve this property will require:
    - [ ] Annexation or Boundary Review Board/Department of Health Approvals
    - [ ] Additional water supply and/or water rights
    - [ ] Other (Describe: \_\_\_\_\_)
- II. Availability of Wastewater Service
  - \_\_\_ a. Wastewater will be provided by a service connection.

An existing \_\_\_\_\_ inch sewer main is located in \_\_\_\_\_  
and is approximately \_\_\_\_\_ feet from the site.  
Step tank located at \_\_\_\_\_ and is approximately \_\_\_\_\_  
feet from the site

- \_\_\_\_\_ b. Wastewater service is available after the following improvements are completed:  
[ ] \_\_\_\_\_ feet of \_\_\_\_\_ inch wastewater mains on \_\_\_\_\_ to reach the site;  
and/or  
[ ] the construction of a step tank on the site; and/or  
[ ] Other (Describe: \_\_\_\_\_)

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CHELAN-DOUGLAS HEALTH DISTRICT

CITY OF LEAVENWORTH WATER SYSTEM

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Public Works Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Planning Department

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signatures of both City departments must be present

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