



WATER/SEWER TAP APPLICATION

Fort Collins - Loveland Water District

South Fort Collins Sanitation District

Date: _____ Name of Applicant: _____

Mailing Address: _____

(City, State, Zip) _____

Contact Name: _____ Phone Number: _____

Lot: _____ Block: _____ Parcel #: _____

Subdivision: _____

Street Address for the Tap:

_____ Commercial Tap
_____ Residential Tap
_____ Irrigation Tap

Have you received & completed the commercial Packet? _____

Water: Yes / No

Sewer: Yes / No

Size of Tap: 3/4" 1" 1.5" 2.0" 3.0" 4.0"

Raw Water Provider: [FCLWD] or [City Of Fort Collins]

Single Family Multi Family Number of Units: _____

Questionnaire Required: _____ Plat Required: _____