



TOWN OF BUENA VISTA
 P.O. Box 2002
 Buena Vista, CO 81211
 719-395-8643 FAX 719-395-8644

RESIDENTIAL WATER TAP APPLICATION

Building Site Physical Address: _____

New Residence

Accessory Dwelling Unit (ADU)

Owner(s) Name: _____ Phone: _____

Mailing Address: _____

Applicant if not owner: _____ Phone: _____

Mailing Address: _____

Length of service line from the main line to house: _____ ft.

For ADU's, length of service line from existing meter to ADU: _____ ft.

***Note: All ADU applications must provide both existing residence line length and proposed ADU line length.**

CONDITIONS

1. Per the Buena Vista Municipal Code, Chapter 13, Article VII, Section 13-127, **all water lines must be inspected.**
2. A waterline inspection must be scheduled by calling the Water Department at 719-395-6898 Ext. 3#, a minimum of 48 hours prior to installation of the waterline.
3. All installation requirements and standards can be found in the Buena Vista Municipal Code, Chapter 13.

The Owner of the property hereby applies for a water tap for the property identified by the physical address listed above. Owner certifies that the water tap is to serve the structure to be built in accordance with the attached building permit. The Owner has given permission for the applicant to apply for the water tap on the owner's behalf.

Owner requests that the water bill be sent to: ___Owner ___Applicant until the Owner notifies the Town otherwise. Owner understands that the Owner is ultimately responsible for all unpaid water bills, which are considered a lien on the property in accordance with Colorado law.

Owner's Signature

Applicant Signature, if not owner

Application Date: _____

FIXTURE COUNT

Physical Property Address : _____

Fixture type	Value 60		# of Fixture		Fixture Value
Bathtub	8	x		=	
Bidet	2	x		=	
Dental Unit	2	x		=	
Drinking fountain	2	x		=	
Kitchen sink:	2.2	x		=	
Bathroom sink:	1.5	x		=	
Shower (without bathtub)	2.5	x		=	
Service Sink:	4	x		=	
Toilet	4	x		=	
Toilet	4	x		=	
Urinal:				=	
Pedestal flush	35	x		=	
Wall flush	16	x		=	
Dishwasher:	2	x		=	
Utility Sink	4	x		=	
Washing machine:	6	x		=	
Hose connection:				=	
1/2" connection	5	x		=	
5/8" connection	9	x		=	
3/4" connection	12	x		=	
				Total	

Irrigation: (per 100 sf)					
spray	1.16	x	(sf)	=	
rotary	0.4	x	(sf)	=	
				Total	

TOWN USE ONLY:

Total Demand: _____

Meter Size: _____

PW Signature: _____

Date: _____

ONCE THE SERVICE LINE HAS BEEN CONNECTED, YOU WILL RECEIVE A WATER BILL EVEN IF NO WATER HAS BEEN USED.

TOWN USE ONLY

System Improvement Fee: _____ Check: _____

Tap #: _____ Route: (1) Southwest _____ (2) Northeast _____ (3) Northwest _____ (4) Southeast _____

Tap Location: _____ Tap Size: _____

Water Service Size: _____ Service Length: _____ Meter Size: _____

Approved By: _____

Inspected By: _____ Tapping Date: _____

Comments: _____