



## UTILITY REQUEST FORM

CONTACT INFORMATION
<p><i>Owner/Developer</i></p> <p>*Contact Name: _____</p> <p>Mailing Address: _____ City: _____ State: ____ Zip: _____</p> <p>*Email: _____ *Telephone: (____) _____ Ext. _____</p>
PROJECT INFORMATION
<p>*Property Address: _____ City: _____ State: ____ Zip: _____</p> <p>*Assessor's Parcel Number(s): _____ (Required Field)</p> <p>Nearest Cross Streets: _____</p> <p>Description of Area: _____</p> <hr/> <p style="text-align: center;"><i>*Please attach any exhibits showing the area requested if available.</i></p> <p style="text-align: right;"><small>*denotes required field</small></p>

***All Responses will be supplied via e-mail. Please allow 3-5 working days from date received for a response.***

<b>FOR EVMWD USE ONLY</b>	Date Received:	Response Date:
	Comments:	

Notice: Any work performed without the presence of a District Inspector is subject to rejection and rework as deemed necessary by District personnel and is also subject to a \$1,000.00 fine, due to an illegal connection.

**All Utility Requests must be returned to [utilityrequest@EVMWD.net](mailto:utilityrequest@EVMWD.net)**

For questions, please contact Engineering at (951) 674-3146 Ext. 6705 or email [utilityrequest@evmwd.net](mailto:utilityrequest@evmwd.net).