

PERMIT CLEARANCE/RELEASE FORM

PROJECT INFORMATION			
*Work Being Performed:		Commercial Project	
*Project Name:		Residential Upgrades	
*Project Location/Address:		Tenant Improvements	
*Site APN/Parcel #:			
*Business Type Current:		*Business Type New:	YES NO
*Change in Ownership Only:			

CONTACT INFORMATION			
*Applicant Name:		OWNER:	
*Company Name:		*Company Name:	
*Address:		*Address:	
*City, State, Zip:		*City, State, Zip:	
*Contact Name:		*Contact Name:	
*Office Phone:		*Office Phone:	
*Email:		*Email:	

REQUIRED DOCUMENTS
The following documents shall be submitted: <input type="checkbox"/> *Building Plans/Tenant Improvement Plans

SUBMITTAL INSTRUCTIONS
1) All (*) are required fields. 2) Submit the application and required documents by the following two methods: a) Emailed to Development@evmwd.net , or b) Drop-off in person or mail to ATTN: Engineering, 31315 Chaney Street, Lake Elsinore, CA 92530 3) For any questions contact the EVMWD at (951) 674-3146 x8427 or via email at Development@evmwd.net ,

CLEARANCE/RELEASE (FOR INTERNAL USE)
The District has reviewed the permit documents for the subject project and has concluded the following: <input type="checkbox"/> The project has complied with District requirements and is clear for permit issuance. See project conditions below (if any). <input type="checkbox"/> The project has <u>not</u> complied with all District requirements and it is <u>not</u> cleared for permit insurance. See project conditions below. <input type="checkbox"/> The project is clear for EVMWD account activation.

PROJECT CONDITIONS (FOR INTERNAL USE)
The following conditions apply to the project: <input type="checkbox"/> Prior to Building Permit issuance, the applicant shall submit a Will Serve Application <input type="checkbox"/> Prior to Building Permit issuance, the applicant shall submit a Commercial/Industrial Form <input type="checkbox"/> Prior to meter release, the applicant shall pay Water and/or Sewer Capacity Fees <input type="checkbox"/> Prior to Certificate of Occupancy, the applicant shall obtain Pre-Treatment clearance <input type="checkbox"/> Prior to Certificate of Occupancy, the applicant shall obtain Backflow clearance

FOR INTERNAL USE	
_____	_____
EVMWD Authorized Signature	Date