

BIGFORK WATER AND SEWER DISTRICT APPLICATION FOR WATER AND/OR SEWER SERVICE

(FOR OFFICE USE)
_____ ACCOUNT NUMBER
_____ SEQUENCE

Owner Name: _____ Date _____

Mailing Address: _____

City/State/Zip: _____

Telephone(s): _____

Physical Address of Service Connection: _____

Nature of Service: WATER SEWER FIRE SPRINKLERS IRRIGATION

Application Review & Inspection Fee: (Water) _____ (Sewer) _____ \$ _____

Plant Investment Fee: (Water) _____ (Sewer) _____ \$ _____

Connection Fee: (Water) _____ (Sewer) _____ \$ _____

Total Due: \$

EXCAVATING CONTRACTOR INFORMATION

(NOTE: Contractor Must have Certificate of Insurance for \$1,000,000 Liability on file with the District prior to work commencement):

Contractor Name: _____ Telephone(s): _____

Contracting Company: _____

TERMS OF AGREEMENT

The undersigned applicant hereby requests to be supplied with water and/or sewer service by the Bigfork Water and Sewer District for the purpose shown hereon, and none other. In consideration of granting this permit, the signed agrees:

1. To accept and abide by all provisions of the Bigfork Water and Sewer Districts Rules and Regulations, and all other ordinances or regulations that may be adopted. A full copy of the District Rules & Regs may be obtained in the District Office.
2. To maintain the water and/or sewer service lines at no expense to the District.
3. To notify the District Office, to schedule, when the building water and/or sewer is ready for inspection and connection to the public water and/or sewer, but before any portion of the work is covered.
4. Plans and specifications for the proposed building water and/or sewer are attached hereto
5. This hookup is valid for 6 months from date of approved application, effective July 1, 2008.

APPLICATION APPROVED AND PERMIT ISSUED:

DATE	APPLICANT SIGNATURE
DATE	DISTRICT MANAGER SIGNATURE

NOTICE:	
The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of the individual applicants on the basis of visual observation or surname.	
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race:	<input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian / Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or Other Pacific Islander
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female

BIGFORK WATER & SEWER DISTRICT HOOK-UP FEE SCHEDULE

EFFECTIVE 09/01/2018

WATER:

SIZE OF SERVICE	¾"	1"	1-½"	2"	3"	4"
APPL REVIEW & INSPECTION FEE:	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00	\$ 100.00
PLANT INVESTMENT FEE:	\$ 2,600.00	\$ 4,654.00	\$ 10,400.00	\$ 18,564.00	\$ 41,600.00	\$ 74,282.00
CONNECTION FEE:	\$ 1,190.00	\$ 2,090.60	\$50.00 Mat & Labor	\$50.00 Mat & Labor	\$50.00 Mat & Labor	\$50.00 Mat & Labor
TOTAL WATER HOOK-UP FEES:	\$3,890.00	\$6,844.60	\$ 10,550.00 + Mat & Labor	\$ 18,714.00 + Mat & Labor	\$41,750.00 + Mat & Labor	\$74,432.00 + Mat & Labor

SEWER:

SIZE OF SERVICE	¾"	1"	1-½"	2"	3"	4"
APPL REVIEW & INSPECTION FEE:	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00	\$ 25.00
PLANT INVESTMENT FEE:	\$ 4,370.00	\$ 7,822.30	\$ 17,480.00	\$ 31,201.80	\$ 69,920.00	\$ 124,850.90
CONNECTION FEE:	\$ 70.00	\$ 70.00	\$50.00 Mat & Labor	\$50.00 Mat & Labor	\$50.00 Mat & Labor	\$50.00 Mat & Labor
TOTAL SEWER HOOK-UP FEES:	\$4,465.00	\$7,917.30	\$ 17,555.00 + Mat & Labor	\$31,276.80 + Mat & Labor	\$ 69,995.00 + Mat & Labor	\$124,925.90 + Mat & Labor

COMBINED TOTALS:

SIZE OF SERVICE	¾"	1"	1-½"	2"	3"	4"
COMBINED WATER & SEWER FEES:	\$8355.00	\$14,761.90	\$ 28,105.00 + Mat & Labor	\$ 49,990.80 + Mat & Labor	\$111,745.00 + Mat & Labor	\$ 199,357.90 + Mat & Labor

*****ALL MUST BE COMPLETED BEFORE APPLICATION IS ACCEPTED*****

CHECK ATTACHED FOR FULL AMOUNT DUE _____

FLATHEAD COUNTY PLANNING & ZONING APPROVAL ATTACHED _____

CONTRACTOR INSURANCE CERT ON FILE _____

PLANS & SPECIFICATIONS FOR PROPOSED WATER & SEWER PROJECT ATTACHED _____

MONTANA STATE PLUMBING PERMIT CERTIFICATE _____

WATER & SEWER SERVICE ACCOUNT APPLICATION COMPLETED BY OWNER _____

ENCROCHMENT PERMITS (IF APPLICABLE) _____

UTILITY EASEMENTS (IF APPLICABLE) _____

Flathead County Planning & Zoning

Water services will require a pressure reduction valve (PRV). If a backflow device is required, the type of device required will be determined by the District.

An appropriate backflow device will be installed on all fire suppression systems. The type of backflow device required will be determined by the District. The Fire Department providing services to an area will determine the need for a fire system, flows required for fire suppression, number and location of fire hydrants. This information will be provided in writing to the District in writing prior to consideration.

All applicable charges and fees will be paid to the District prior to construction.

All water and sewer installations will be inspected by District personnel prior to burial. Failure to have installations inspected will result in re-excavation and/or disapproval of the installations. Inspections will be performed during District working hours and could take up to 24 hours for inspections to occur.

Other requirements and specifications are provided in the District Water & Sewer Design Specifications. Questions regarding use of materials, devices, etc. not covered in the specifications will be considered by the District.

APPLICANT	Current use: _____ Proposed Use: <input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Multi-Family Dwelling <input type="checkbox"/> Accessory Building <input type="checkbox"/> Commercial Use <input type="checkbox"/> Other _____
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COUNTY PLANNING & ZONING	<p><u>Zoning:</u></p> Zoning designation of subject property _____ Does the proposed use comply with zoning? Yes <input type="checkbox"/> No <input type="checkbox"/> If compliant; Zoning Administrator's (or designee) signature: _____ Date: _____ <p><u>Floodplain:</u></p> Is the subject property shown as Zone A, or "100 year floodplain" on FEMA's Flood Insurance Rate Map? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, does the proposed use comply with the Flathead County Floodplain and Floodway Management Regulations? Yes <input type="checkbox"/> No <input type="checkbox"/> If compliant, Floodplain Administrator's (or designee) signature: _____ Date: _____
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Owner / Developer: _____ Date: _____

Contractor: _____ Date: _____

Flathead County Planning & Zoning 40 11th Street West, Suite 220
 Kalispell, MT 59901 Phone: 406.751.8200 Planning.Zoning@flathead.mt.gov