

Department of Public Works Special Districts Water and Sanitation Division 15900 Smoketree Street, 1st Floor Hesperia, CA 92345 Office:760.955.9885

REQUEST FOR OFF-SITE METER

DEVELOPMENT SERVICES UNIT

devservices@sdd.sbcounty.gov

DATE:	CSA:
COMPANY:	CONTACT NAME:
MAILING ADDRESS:	
	STATE: ZIP:
PHONE NUMBER:	EMAIL ADDRESS:
JOB SITE ADDRESS (or descriptive lo	ocation):
	APN:
TYPE OF USE (grading house pad,	mainline extension, etc.):
TYPE OF PERMIT ISSUED (MUST ATTA	CH COPY; if no building/grading permit - must have TO1 for pre-site work):
GALLONS PER DAY (estimate): LOCATION OF HYDRANT:	NUMBER OF DAYS:
APPROVED:□ DISAPPROVED:□	BY(AUTHORIZED PERSONNEL):
LIMITATIONS:	
PERMIT NUMBER:	MUNIS ACCOUNT NUMBER: