

## **APPENDIX C:**

### **WATER SERVICE APPLICATIONS**

- Potable Water Service Agreement
- Property Owner Affidavit for Tenant Service
- Development Service Application



POTABLE WATER SERVICE AGREEMENT

\*\*\* The following is required to establish service with the Nueces County Water Control and Improvement District #3: Proof of ownership, Lease Agreement, or Affidavit for service from Owner, Photo identification; Service Deposit \*\*\*

Date: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ACCOUNT PASSWORD \_\_\_\_\_

AUTHORIZED REPRESENTATIVES: \_\_\_\_\_

CHECK ALL APPLICABLE ITEMS:

\_\_\_ Residential \_\_\_ Commercial \_\_\_ Owner \_\_\_ Tenant \_\_\_ New Construction

This agreement is entered into by Nueces County Water Control and Improvement District No. 3 (District) and \_\_\_\_\_ (Customer), for potable water service at the above address.

The District is responsible for protecting the drinking water supply from contamination or pollution which could result from improper private water system construction or configuration. The District enforces these rules to ensure public health and welfare.

**RESTRICTIONS-** The following unacceptable practices are prohibited by State regulations:

- No direct connection between the public drinking water supply and a potential source of contamination is permitted. Potential sources of contamination shall be isolated from the public water system by an air-gap or an appropriate backflow prevention device.
- No cross-connection between the public drinking water supply and a private water system, including wells, is permitted. These potential threats to the public drinking water supply shall be eliminated at the service connection by the installation of an air-gap or a reduced pressure zone backflow prevention device.
- No connection which allows water to be returned to the public drinking water supply is permitted.
- No pipe or pipe fitting which contains more than 8.0% lead may be used for the installation or repair of plumbing at any connection which provides water for human use.
- No solder or flux which contains more than 0.2% lead can be used for the installation or repair of plumbing at any connection which provides water for human use.





PROPERTY OWNER AFFIDAVIT  
FOR TENANT SERVICE

\*\*\* The following is required to establish service with the Nueces County Water Control and Improvement District #3 for a Tenant \*\*\*

DATE: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

OWNER NAME: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ACCOUNT PASSWORD \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_

AUTHORIZED REPRESENTATIVES: \_\_\_\_\_

TENANT NAME: \_\_\_\_\_

TENANT ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TENANT PHONE: \_\_\_\_\_

I hereby make application for water service from the Nueces County Water Control and Improvement District #3 (District), subject to all District policies and rates now existing or hereafter adopted and agree to pay all charges as provided for therein and that the obligation of the parties are covered thereby. This application shall automatically grant the District the right to access the property for performance of District services. I hereby certify that I am the legal property owner and have authority to establish utility services at the above service location.

I understand that by placing the water service in the Tenant's name that I will forfeit any rights to terminate water service to the property, and I will not be able to make any changes to the account without authorization of the Tenant.

I agree that by putting the billing in the name of my tenant and if the tenant fails to pay the utility bill I will be responsible for all charges including but not limited to the water bill, penalties and other billing fees. A deposit is required before a water service will be set up in a tenant's name.

\_\_\_\_\_  
*Owner Signature \**

\_\_\_\_\_  
*Date*

*\*Notarized signature is required*



# DEVELOPMENT SERVICE APPLICATION

For  
Office  
Use Only

NCWCID#3 Project No.:

Initial Consultation Date:

Preliminary Review Date:

Final Review Date:

<b>1</b>	<b>OWNER:</b> Name: Telephone: Email: Address:
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<b>2</b>	<b>ENGINEER:</b> Name: Telephone: Email: Address:
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<b>3</b>	<b>DEVELOPMENT LOCATION:</b> Address/ Lot and Block/ Cross Streets:
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<b>4</b>	<b>DEVELOPMENT TYPE:</b> <input type="checkbox"/> Residential Subdivision <input type="checkbox"/> Commercial Subdivision <input type="checkbox"/> Commercial / Industrial Development <input type="checkbox"/> Other
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<b>5</b>	<b>PROJECT DESCRIPTION:</b> Describe proposed development (number of lots, units, etc.)  
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<b>6</b>	<b>WATER DEMAND:</b> Average Daily Usage Peak Daily Usage Fire Demand Fire Sprinkler Demand Fire Sprinkler Pump Model / Capacity: Irrigation Sprinkler Demand
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<b>7</b>	<b>CERTIFICATION:</b> Owner's Signature: _____ Date: _____ Owner's Printed Name: _____ Engineer's Signature: _____ Date: _____ Engineer's Printed Name: _____
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Application Fee: An application fee of \$500.00 is required prior to the processing of the development permit application.

NOTE: This is not a building permit. Any approvals granted regarding this application do not excuse the applicant from complying with the requirements of any other municipalities wherein the subject property lies.