

(512)246-1400 Office (512) 246-1900 Fax **Wildwood MUD** 

MAIL TO: Crossroads Utility Services 2601 Forest Creek Drive Round Rock TX 78665-1232

## **TAP AND FEE APPLICATION**

For Water/Wastewater Service

Date of Application:						
Applicant:						
Billing Address:						
Telephone:						
Applicant's Plumber:		Plumber's Telephone:				
Application is for (please circle all that apply):		Water		Sewer	Fire Hydrant	
Meter Size:						
ALL FEES ARE PAYABLE	TO THE DISTRICT					
Please supply the following inf Address	ormation: Zip Code	Lot	Blk	Sect.	*Sq. Ft.	District Use Only Folio #
1. 2.						
3.						
4 5.						
An approved water tap inspect OF CUSTOMER SERVICE I transfer to next owner.		IFICATE	FROM B	UILDER OR	PLUMBER,	we can then
I, the Applicant agree to complete the Builder's responsible 512-328-6995.  The owner's cut-off valve & management inspection. I will notify Creation.	y with the following: bility to call before so heter box with lid sha cossroads Utility Ser	starting call be in povices in v	eonstructions at the writing 24	on. Please e time of me hours in ac	contact ATS	<b>Engineers at</b> n for complete
inspection and install my m	leter by laxing in my	request to	0 (312) 240	5-1900.		
		Applicant Signature				
	FOR OF	FICE USI	E ONLY			
Date Received:	Chec	k #:		Amount	: \$	
Water Tap Fee: \$	Sewer Tap F	ee: \$		Inspecti	on Fee: \$	
Impact fees: \$						