



Golden Water Supply

P O Box 148, Golden, Texas 75444

903-768-2861

903-768-2866 Fax

www.goldenwatersupplycorp.com

NON-STANDARD SERVICE SURVEY

Please Print or Type Clearly

Applicant's Name: _____

Address/City/State/Zip: _____

Phone Number: (____) ____ - _____

Email: _____

Please attach a legal description of the proposed development as listed on deed records as a filed plat or parcel of land where other types of non-standard water service are requested. Plat requirements include name of subdivision, owner/developer's name, lot sizes and lot lines, lot numbers, right of way dimensions and dedicated utility easements, legal description, highway and county road numbers, total acreage, adjoining property owners, flood plain, and vicinity map. **Instruments must show proof of ownership; preliminary plats are acceptable for discussion purposes but an "approved subdivision plat" must be provided before contract closing.**

****The county in which you are developing your property in has specific subdivision regulations that you must abide by. It is advised that you contact them for further information regarding their requirements. ****

Check type of service application or development:

- | | | |
|--|---|---|
| <input type="checkbox"/> Residential Subdivision | <input type="checkbox"/> Manufactured Housing Park | <input type="checkbox"/> Large Meter > 1" |
| <input type="checkbox"/> Muilt-Family | <input type="checkbox"/> Commercial/Industrial Park | <input type="checkbox"/> Line Extension |
| <input type="checkbox"/> Muilt-Use Facility | <input type="checkbox"/> RV Park | <input type="checkbox"/> Additional Service Meter |
| <input type="checkbox"/> School | <input type="checkbox"/> Other _____ | |

Please list all water demand criteria for each meter or meter equivalent, or attach any engineering studies completed for the proposed service: _____

Maximum number of proposed lots: _____

Range of standard lot size: _____

Acreage: _____

Please describe in detail the nature and scope of the project/development: _____

Initial needs: _____

Phased and final needs, including a map showing each phase, and the projected land uses that support the requested level of service for each phase.

Please list any additional special service needs not listed above: _____

Please provide the timeline for initiation of this service, and for service to each additional or projected phase following initial service, including a schedule of events leading up to the anticipated date of service. Specify this for all additional or projected phases. _____

Please describe how the utility may access the property during evaluation of application:

Please attach the following information, as applicable:

- A proposed calendar of events, including design, plat approval, construction phasing and initial occupancy.
- If applying for a single tap the requires a line extension, road bore, or upsizing of facilities, maps or plans detailing the location of the requested service installation and/or extension and details of demand requirements.

Corporation's response to service survey

The Corporation will submit the survey to our engineer. The engineer will send a cost to do an impact study and design of our existing system. We will notify you when we receive the cost from the engineer to move forward with the service investigation.