



CITY OF PORT ORCHARD

Permit Center

Office located at 720 Prospect Street
Mailing address: 216 Prospect Street
Port Orchard, WA 98366
(360) 874-5533 • permitcenter@cityofportorchard.us

WATER AND/OR SEWER CONNECTION PERMIT APPLICATION

Incomplete Submittal Will Not Be Accepted.

1. PROJECT INFORMATION:	
Tax Parcel Number: _____	
Site Address / Location: _____	
Has property previously been connected to a City utility? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does the property have a previously issued and unexpired City Capacity Reservation Certificate for water and/or sewer? <input type="checkbox"/> Yes: <i>Attach a copy of the certificate.</i> <input type="checkbox"/> No: <i>Contact the Permit Center for requirements.</i>	
2. CONNECTION IS FOR: <i>(Check all that apply)</i>	
<input type="checkbox"/> For Single-family Residence.	<input type="checkbox"/> For Multi-family: number of units _____
<input type="checkbox"/> Other Use: <i>(Describe)</i> _____	
WATER:	SEWER:
<input type="checkbox"/> Re-connect: Meter already on site.	<input type="checkbox"/> Re-connect. <i>(Property previously had an account).</i>
<input type="checkbox"/> Re-connect: Need meter dropped.	<input type="checkbox"/> New Side Sewer Permit.
<input type="checkbox"/> New Water for Building: Meter size: _____	
<input type="checkbox"/> New Water for Irrigation: Meter size: _____	
3. CONTACT INFORMATION:	
Owner's Name: _____	
Owner's Mailing Address: _____	
Phone: _____	Email: _____
Builder's Name <i>(for new development)</i> : _____	
Water Line Installer <i>(Complete if applicable)</i> : _____	
Mailing Address: _____	Phone: _____
Contractor's License/Registration #: _____	Expiration Date: _____
City Business License: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Apply online at bls.dor.wa.gov)</i>	UBI #: _____
Side Sewer Contractor <i>(Contractor required for sewer connection)</i> : _____	
Mailing Address: _____	Phone: _____
Contractor's License/Registration #: _____	Expiration Date: _____
City Business License: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Apply online at bls.dor.wa.gov)</i>	UBI #: _____

Owner's Signature

Print Name

Note: *If the referenced property is within ULID#1 you may be entitled to a credit. To apply for a credit, submit a written request with a copy of the Title Report showing the property is within ULID#1 with this Water/Sewer connection permit application. The City will review your request and determine if you are entitled to a credit. No request for credit will be accepted after water/sewer connection permit application has been received.*

STAFF USE ONLY - DO NOT WRITE BELOW THIS LINE

Receipt #

Collected By

On Date

File #