RESIDENTIAL ASSESSMENT FORM

Legal Description: Lot ____ Block ____ Filing ____ Subdivision _________________________
Service Address ______________________________ District ______________________________
City, Zip Code ___________________________ Structure Type ___________________________

Square Footage: 
Upper _______________ Meter Size: _______________
Upper _______________ Total Fixture Count: _______________
Main _______________ 
Lower _______________
Total Square Feet: _______________ Total # of Floors in Structure: _______________

Owner Name: _________________________ Builder Name: _________________________
Mailing Address: _________________________ Mailing Address: _________________________
Telephone: _________________________ Telephone: _________________________
Fax: _________________________ Fax: _________________________
E-Mail: _________________________ E-Mail: _________________________

I verify that the above stated square footage complies with the Eagle River Water & Sanitation District’s Rules and Regulations. The square footage stated above is based on the gross square footage inclusive of outside wall to outside wall, unfinished areas, mechanical rooms, storage areas and basements and attics over five feet high. In multi-unit or mixed-use facilities, common space is also included. I understand that Eagle River Water & Sanitation District has the final judgment on the property’s square footage calculation and meter size. I also understand that the Tap Fee Connection Rate Schedule can be found under Appendix A of the district’s Rules & Regulations. I understand that the fees due are based on current fees (as shown in Appendix A) for the calendar year in which payment is received.

I confirm that I am aware of the Eagle River Water & Sanitation District’s Rules & Regulations for Water and Wastewater Service Construction Specifications. These specifications can be found at www.erwsd.org/resources/rules-regulations.

Print Name

Signature

Office Use Only:

CS Specialist

Date