

**SITE ID AND SERVICE REQUEST FORM**  
**PLEASE PRINT**

Date \_\_\_\_\_

Residential

Commercial

Request of new tap

Electric

Water

Sewer

Type of service

Single Phase

5/8 x 3/4

4 Inch

Three Phase

1 Inch

6 Inch

Above Ground

1.5 Inch

Other \_\_\_\_\_

Under Ground

2 Inch

Extension required

Upgrade

Extension

Temporary

required

Extension required

Irrigation

Characteristics (eg. 100A, 120/240V 1P 3W) (Electricians only) \_\_\_\_\_

Single Family

Multi Units Residential

Modular/Manufactured Home

Single Commercial

Multi Units Commercial

Owner/Builder \_\_\_\_\_ Account # \_\_\_\_\_

Phone # \_\_\_\_\_ Cell# \_\_\_\_\_

Address of service requested \_\_\_\_\_

If Modular/Manufactured Home-Estimated - date of delivery \_\_\_\_\_

Electrician Name \_\_\_\_\_ Plumber Name \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Contact Person (if different than above) \_\_\_\_\_

I request that the City of Llano install \_\_\_\_\_ tap at the above address. I also acknowledge (if applicable) that a consumer lift station may be required to access the City's sewer main or laterals, at property owners' expense.

X \_\_\_\_\_

Signature required

OFFICE USE ONLY:

Tap Fee cost \$ \_\_\_\_\_

Deposit Required  Yes

No

Tap Fee paid  Yes

No

Work order issued  Yes

No

Approved by \_\_\_\_\_

Date \_\_\_\_\_