

# Onslow Water and Sewer Authority

## Application for Water Allocation

The following information must be provided by the Applicant in order for your application to be processed.

Project Name: \_\_\_\_\_

Type of Request:  Initial  12-month Extension  Modification  Additional Allocation

### Applicant Information

Applicant's Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Designated Representative Information

Representative's Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Project Information

Project Description: \_\_\_\_\_

Project Location: \_\_\_\_\_

Total Number of Units/Lots: \_\_\_\_\_ Total Sq Ft (Commercial): \_\_\_\_\_

Allocation Category:  Single Family  Multi-Family  Commercial  Discretionary

Project Priority (See ONWASA Utility Ordinance):  1<sup>st</sup> Tier  2<sup>nd</sup> Tier

Residential Mix: \_\_\_\_\_

1 Bedroom    2 Bedroom    3 Bedroom    4 Bedroom    Other (Specify)

Total Requested Allocation: \_\_\_\_\_ gallons per day

The Applicant hereby acknowledges and understands that this water allocation will expire if not "used" (as defined in the ONWASA Utility Ordinance) within 24 months of approval. Applicant also acknowledges this allocation is project and site specific and is NON-TRANSFERRABLE without prior written authorization from ONWASA.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date