



Department of Water Resources  
 Domestic Water Division  
 1000 Buena Vista Road  
 Bakersfield, California 93311  
 Phone (661) 326 - 3715  
 e-mail: [water@bakersfieldcity.us](mailto:water@bakersfieldcity.us)

**Application for domestic water service  
 (Pursuant to Bakersfield Municipal Code 14.04.030)**

THIS SECTION FOR OFFICE USE ONLY NOT FOR USE BY APPLICANT			
Date Paid		Inspection Fee @ 5% of Contractor Off-site Invoice	\$
Date Paid		Meter Set Fee @ \$10.00 each	\$
Date paid		Water Availability Fees @ \$5,664.00 / gross acre	\$

**Instructions:**

- 1) *Please fill out the required fields of the application as indicated and check appropriate boxes which apply*
- 2) *Please return original completed application to City Water by e-mail or hard copy to the address as shown above. (Please note that fax applications are not acceptable)*
- 3) *Along with the application please submit a clear and legible 8-1/2" X 11" map of property as well as a legal description of property on seperate pages*
- 4) *A digital electronic file of City approved water plans as per the Domestic Water Service Agreement will be required to be submitted by the developer*

**Applicant is (check one):**      *owner*      *builder*      *tenant*      *agent*

**Address** to which correspondence and invoices are to be mailed or delivered      **(check one):**      *Applicant*      *Owner*

**Applicant:**

Name:	
Company:	
Street address:	
City, State, Zip Code:	
Phone #:	(      )
Federal Tax I.D. No.	
Corporation?	Yes____ No____ <b>(Please Check One)</b>
Type of corporation	

**Owner: (if different than applicant)**

Name:	
Company:	
Street address:	
City, State, Zip Code:	
Phone #:	(      )
Federal Tax I.D. No.	
Corporation?	Yes____ No____ <b>(Please Check One)</b>
Type of corporation	

**Builder: (if different than applicant)**

Name:	
Company:	
Street address:	
City, State, Zip Code:	
Phone #:	(      )
Federal Tax I.D. No.	
Corporation?	Yes____ No____ <b>(Please Check One)</b>
Type of corporation	

**Location Of Premises To Be Served:** \_\_\_\_\_

**(Tract, Parcel Map No.):** \_\_\_\_\_

**Assessor's Parcel Map No. (APN #):** \_\_\_\_\_

**Conditional Use Permit No. (CUP #):** \_\_\_\_\_

**Zoning =** \_\_\_\_\_

**Total Gross Acreage (Do Not Use Net Acreage)**

**Water Availability Fee @ \$5,664.00 per gross acre as of 01-01-2011**

**gross acres =**

Amount: \$	Date Paid:
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**Has applicant applied for water service for this location before?:**

**Yes      No      (Please Check one):**

**If so, under what location (Name, Tract, Parcel Map No.):**

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**Date applicant will be ready for service**

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TEMPORARY

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PERMANENT

**Purpose for which service is to be used:**

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**Size(s) of services desired:**

Domestic

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Fire

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Landscape

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**Name:**

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**Title:**

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