



GEORGETOWN DIVIDE
Public Utility District

P.O. BOX 4240

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gd-pud.org

**AUBURN LAKE TRAILS
WASTEWATER DISPOSAL MANAGEMENT ZONE**

ON-SITE WASTEWATER DISPOSAL SYSTEM DESIGN REQUEST

REQUEST DATE: _____ REQUESTED BY: _____

APN #: _____ ALT LOT #: _____

PROPERTY ADDRESS: _____

OWNER(S) NAME: _____

MAILING ADDRESS: _____

PHONE #: (_____) _____

CONTRACTOR: _____ PHONE #: (____) _____

THE FOLLOWING DESIGN AND PERMIT FEES ARE DUE AT THE TIME OF THE APPLICATION.

| <input checked="" type="checkbox"/> ITEMS REQUIRED | <input checked="" type="checkbox"/> DESIGN AND PERMIT FEES PAID |
|---|--|
| <input type="checkbox"/> LEGAL OWNER | <input type="checkbox"/> COMMUNITY DISPOSAL \$3,210 (\$740 DESIGN/\$2,470 CONNECTION FEE) |
| <input type="checkbox"/> FLOOR PLAN | <input type="checkbox"/> DESIGN REVIEW & PERMIT \$820 (IF USING PRIVATE CONSULTANT) |
| <input type="checkbox"/> PLOT PLAN | <input type="checkbox"/> METER JOB REQ#: \$TBD (PRICE BASED ON METER SIZE) |
| <input type="checkbox"/> GRADING PLAN | <input type="checkbox"/> PLAN REVIEW/NO SEPTIC UPGRADES \$100 PROJECT REQUIRING BUILDING PERMIT |
| <input type="checkbox"/> LOT CORNERS FLAGGED | |
| <input type="checkbox"/> GRANT AND AGREEMENT | |

TOTAL PAID: \$ _____ DATE: _____

TO BE COMPLETED BY ZONE PERSONNEL:

TYPE OF SYSTEM DESIGNED: _____ DESIGNED BY: _____

CUSTOMER CALLED: _____ CUSTOMER PICK-UP OR MAILED: _____