



ASSSD Water Application Form

DATE:

PARCEL:
ADDRESS:

ALLOTMENT \$12,000

IMPACT FEE \$9,335

HOOK-UP \$4,500

NEW CUST/ TRANSFER FEE \$100

(New Owners)

TOTAL:

COMMENTS:

NAME:

SPOUSE'S NAME;

PHYSICAL ADDRESS:

ALTERNATE / PO BOX ADDRESS:

EMAIL:

PHONE:

ALT. PHONE:

DRIVERS LICENSE#

STATE:

SIGN HERE:

CUSTOMER/ APPLICANT

DATE

Please fill-out, print, sign, mail with check to:
ASSSD
PO Box 461234
Leeds, UT 84746

No writing below this line

APPROVED BY:

ASSSD TREASURER

PAID DATE

(2026 V1)