



**LOXAHATCHEE RIVER ENVIRONMENTAL CONTROL DISTRICT**  
**2500 JUPITER PARK DRIVE, JUPITER, FL 33458-8964**  
 Phone: 561-747-5700 ext. 110; Fax: 561-747-9929; [www.loxahatcheeriver.org](http://www.loxahatcheeriver.org)  
 Email: [info@lrecd.org](mailto:info@lrecd.org)

**APPLICATION FOR SERVICE – NEW CONSTRUCTION - COMMERCIAL**

The undersigned applicant hereby applies for sewer service to be provided by the Loxahatchee River District (District), to the real property identified below. The undersigned applicant warrants, represents and agrees to the following:

1. The applicant is the fee simple owner of the property for which application is made.
2. The applicant will promptly pay all bills submitted to applicant for sewer service by the DISTRICT.
3. The applicant will abide by all rules and regulations of the DISTRICT as they have been and may be lawfully adopted.
4. The applicant will notify the DISTRICT when the sewer lateral is uncovered and ready for a connection inspection.
5. The applicant will promptly notify the DISTRICT of any change in mailing address and, when the subject property is transferred or conveyed.

Applicant/Owner \_\_\_\_\_ Phone # \_\_\_\_\_

D/B/A/ \_\_\_\_\_ Billing Address \_\_\_\_\_

Address of Property \_\_\_\_\_ Lot/Blk/Unit No. \_\_\_\_\_ Development \_\_\_\_\_

Contractor \_\_\_\_\_ Phone# \_\_\_\_\_ Plumber \_\_\_\_\_ Phone# \_\_\_\_\_

Office Bldg.(Sq. Ft.) \_\_\_\_\_  Restaurant (Seating) \_\_\_\_\_  Other: \_\_\_\_\_ No. Toilets: \_\_\_\_\_

Type of Waste Stream (Select all that apply):

Domestic Waste       Grease (Submit Grease Interceptor Application Questionnaire)

Industrial (Submit Individual Industrial User Survey & Permit Application)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Applicant/Owner

.....  
 \_\_\_\_\_ Number of E.C.'s \_\_\_\_\_

Engineering Approval

Plant Connection Charge (Ref. Rule 31.10)      \$ \_\_\_\_\_  
 Administrative Fee      \$ \_\_\_\_\_  
 Transmission Line Charge (Ref. Rule 31.10)      \$ \_\_\_\_\_

CONNECTION FEE TOTAL      \$ \_\_\_\_\_

Date Payment Received \_\_\_\_\_ By: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_