



City of Austin | Austin Water  
 625 E 10<sup>th</sup> Street, Suite 715  
 Austin, Texas 78701  
<http://www.austintexas.gov/SER>  
[SER@austintexas.gov](mailto:SER@austintexas.gov)

### Service Extension Request Application and Fair Notice Form

Water       Wastewater       Reclaimed Water

Project Name:	<input type="checkbox"/> SMART Housing Project
Site Address:	Zip:
Tax Parcel #	

Name of Owner (Type or Print)	Signature of Owner	Date
Name of Developer or Authorized Agent (Type or Print) [If Different than Owner]	Signature of Developer or Authorized Agent	Date
Name of Engineer (Type or Print)	Signature of Engineer	Date

STATE OF \_\_\_\_\_  
 COUNTY OF \_\_\_\_\_  
 This instrument was acknowledged before me on this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by

\_\_\_\_\_  
 Printed Name of Signer (Owner)

\_\_\_\_\_  
 Notary Public, State of \_\_\_\_\_

Engineer:	
Firm:	
Address:	
Phone Number:	email:

<input type="checkbox"/> Owner <input type="checkbox"/> Developer	Name:
Firm:	
Address:	
Phone Number:	email:

Have you submitted both Water and Wastewater service extensions? Yes  No

If not, please explain why it is not necessary:

Feasibility investigation of decentralized wastewater options (required for wastewater SERs only)

Due to the proximity of centralized wastewater service and/or the density of this development, decentralized wastewater options were not determined to be feasible.

Other (Provide decentralized wastewater feasibility investigation statement in the submitted Engineering Materials)

Related Development Cases (Plat, Preliminary Plan, or Site Plan):
Quadrant location number(s):
Percent of tract within the City Limits of Austin:
Percentage of tract within the Desired Development Zone:
Percentage of tract within the Drinking Water Protection Zone:
Water pressure zone:
Water provider:
Wastewater drainage basin:
Wastewater provider:
Reclaimed water pressure zone (if applicable):

**Proposed Use(s):**

Single Family Residence, Modular Home, Mobile Home	_____ (number of units)
Duplex	_____ (number of duplexes)
Triplex, Fourplex	_____ (number of units, e.g. 1 triplex = 3 units)
Condo Unit; P.U.D. or Apartment Unit (less than 24 units/acre)	_____ (number of units)
Condo or Apartment Unit (greater than or equal to 24 units/acre)	_____ (number of units)
Hotel or Motel Room	_____ (number of rooms)
Office	_____ (total square feet)
Office Warehouse	_____ (total square feet)
Retail, Shopping Center	_____ (total square feet)
Restaurant, Cafeteria	_____ (total square feet)
Hospital	_____ (number of beds)
Rest Home	_____ (number of beds)
Church (Worship services only)	_____ (number of seats)
High School / Middle School (includes Gym and Cafeteria)	_____ (number of students)
Elementary School (includes Gym and Cafeteria)	_____ (number of students)
Other (Specify _____)	_____ (number of _____)
<b>LUE Subtotal:</b>	_____

LUE Guidance Document Available Upon Request

**Information for the Proposed Service Extension*****Supporting Calculations and Documentation are required***

Property Area (acres): \_\_\_\_\_

Water Demand: Peak Hour \_\_\_\_\_ gpm; Peak Day \_\_\_\_\_ gpm

Fire Flow Requirement (unsprinkled)\*: \_\_\_\_\_ gpm for \_\_\_\_\_ hours at \_\_\_\_\_ psi

Sprinkler Reduction: Yes  No 

Fire Flow Requirement (with sprinkler reduction, if applicable)\*: \_\_\_\_\_ gpm for \_\_\_\_\_ hours at \_\_\_\_\_ psi

Wastewater Flow (Peak Wet Weather Flows with Inflow &amp; Infiltration): \_\_\_\_\_ gpm

Reclaimed Water Demand (Max Day with Irrigation and Cooling): \_\_\_\_\_ gpm

Highest Elevation on the Land to be Served by the SER: \_\_\_\_\_ above mean sea level

Lowest Elevation on the Land to be Served by the SER: \_\_\_\_\_ above mean sea level

**\*The Fire Flow Requirement should be based on the International Fire Code. For more information please contact the Austin Fire Department, Engineering Services at 512-974-0160.**