



# TRAVIS COUNTY WATER CONTROL AND IMPROVEMENT DISTRICT 17

## Service Extension Request (SER) Form

*Phone: (512) 266-1111 Fax: (512) 266-2790*

**Please Return To:  
3812 Eck Lane • Austin, Texas 78734**

**Water**       **Wastewater**

Project Name:				SER #
Site Address:				Zip:
Legal Description	Lot	Block	Subdivision	Sec #
OR	Acres	of the		Survey #
Tax Parcel #				

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Name of Owner (Type or Print)	Signature of Owner	Date
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Name of Applicant (Type or Print)	Signature of Applicant	Date
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Unless otherwise indicated, all correspondence shall be to the following (Commercial Service Only):

Project Name		File Number:
Engineer:		
Firm:		
Address:		
Phone #:	Fax #:	Email

Billing Information (All invoices will be sent to the following):

Project Name		File Number:
Name of Owner/Developer:		
Firm:		
Address:		
Phone #:	Fax #:	Email

Are you requesting both Water and Wastewater service? Yes  No

If not, please explain why applicable service is not necessary:

Property Description (acres):

<b>Proposed Development Intended Use:</b>	<b>No. of units or square footage (ft<sup>2</sup>)</b>
A Single Family Residence, Modular Home, Mobile Home	_____ (number of units)
B Duplex	_____ (number of units)
C Triplex, Fourplex	_____ (number of units)
D Condominium (Less than or equal to 24 units per acre)	_____ (number of units)
E Condominium (Greater than 24 Units per acre)	_____ (number of units)
F Apartment	_____ (number of units)
G Hotel or Motel Room	_____ (number of units)

**Information for the Proposed Service Extension (Commercial Service):**

Water Utility Requirements: Peak Hour \_\_\_\_\_ gpm; Peak Day \_\_\_\_\_ gpm

Highest (Unsprinkled) Fire Flow Requirement: \_\_\_\_\_ gpm for \_\_\_\_\_ at 20 psi

Fire Flow rate (with sprinkler reductions if applicable): \_\_\_\_\_ gpm; for \_\_\_\_\_ hours at \_\_\_\_\_ psi minimum residual pressure

Wastewater Utility Capacity Requirements (Peak Wet Weather Flows with Inflow and Infiltration): \_\_\_\_\_ gpm

\*Commercial Buildings will be assumed to have a 2" water meter unless otherwise requested.

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**FOR OFFICE USE ONLY**

**LUE Calculations:**

\*Water Living Unit Equivalents (LUE's): \_\_\_\_\_

\*Wastewater Living Unit Equivalents (LUE's): \_\_\_\_\_

\*Landscape Irrigation Living Unit Equivalents (LUE's): \_\_\_\_\_ Lowest elevation on the land to be served by the SER: \_\_\_\_\_ above mean sea level

**Provide Location map, Certified Plat, Site Plan, and/or Landscape Irrigation Plan, as applicable.**

\* Calculated according to the conversion table below.

**LUE Conversions by Use:**

**Residential (Water or Wastewater)**

One (1) Single-Family Residence, Modular Home, or Mobile Home

Sized IAW Meter Size

One (1) Duplex

2 LUE's

One (1) Triplex, Fourplex, Condominium Unit (6 – 24 Units/Acre)

0.7 LUE's/Unit

One (1) Apartment Unit (24(+) Units/Acre)

0.6 LUE's/Unit

One (1) Hotel or Motel Room

0.6 LUE's/Room

**Water**

**Waste Water**

<b>Meter Size</b>	<b># LUEs Required</b>	<b>Meter Size</b>	<b># LUEs Required</b>
5/8"	1 (D)	5/8"	1 (D)
3/4"	1.5 (D)	3/4"	1 (D)
1"	2.5 (D)	1"	2.5 (D)
1 1/2"	5 (D)	1 1/2"	5 (D)
2"	8 (D)	2"	8 (D)
3"	15 (D) or 18 (T)	3"	15 (D) or 18 (T)
4"	25 (D) or 30 (T)	4"	25 (D) or 30 (T)
6"	50 (D) or 60 (T)	6"	50 (D) or 60 (T)
8"	90 (T)	8"	90 (T)

**SER Application Fees:**

**Non-Refundable Application Fee:** \$50

**Customer Service Inspection:** \$60

**Plan Review (Single Family Residential):** \$250

**Plan Review Fee(Residential, Multifamily, Commerical):**

<b>LUEs</b>	<b>Base Fee</b>
1-10	\$ 850
11-50	\$ 2,000
51-250	\$ 4,800
251-1,000	\$ 9,500
>1,000	\$19,000

**Total Application and Review fees due:** \$ \_\_\_\_\_

**\*SER Deposit (Multifamily >6units, Hotel/Motel):**

\$5,000.00 (Minimum or As Required)

\*Should depletion of Initial Deposit occur, Supplementary Deposit may be requested from the Applicant to cover Engineering and Legal fees