



City of Cape Canaveral

Reclaimed Water Application

DATE OF APPLICATION: _____

NAME: _____

MAILING ADDRESS: _____
NUMBER AND STREET NAME CITY STATE

PHONE NUMBER: _____

CUSTOMER CATEGORY (CHECK ONE)

CLASS A (RESIDENTIAL) _____

CLASS AM (MULTI-FAMILY) _____

CLASS B (COMMERCIAL) _____

NUMBER OF UNITS: _____

NUMBER OF ACRES: _____

PROPERTY NAME: _____
(IF APPLICABLE)

SERVICE ADDRESS: _____

	<u>YES</u>	<u>NO</u>
1. Have you read and do you understand the Reclaimed Water Information Packet?		
2. Do you currently have an in ground irrigation system?		
3. If yes, is this system supplied by Potable (City) or Non-potable (Well)?	City	Well
4. Are there any spigots or hose bibs on your current irrigation system?		
5. Do you have a well on your property?		
6. Do you have a water to air A/C system?		
7. Do you have a separate irrigation water meter?		

I, the property owner, have been given information and understand the City's policies and procedures of Reclaimed Water Service and agree to restrict use of Reclaimed Water for the purpose(s) described. It is further agreed that the City shall have the right to enter the above premises to inspect the reclaimed water piping, fittings, and appurtenance to include any device for cross-connection with another service or water source or any other reason that may be detrimental to the City system. It is further agreed that each customer of Reclaimed Water shall not have any recourse against the City for the loss of reclaimed water supply due to main distribution system down times, or for damage to vegetation or any other damages occasioned by the use of Reclaimed Water.

I hereby acknowledge and agree to the above:

Signature

Date

City Use Only:

Connection Fee Paid: _____ Check Number: _____ Amount: _____

Accepted: _____ Rejected: _____ Type backflow device required: _____