



**City of Austin | Austin Water**  
6310 Wilhelmina Delco Drive, Suite 3100  
Austin, Texas 78752  
<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
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Name of Developer or Authorized Agent (Type or Print) [If Different than Owner]	Signature of Developer or Authorized Agent	Date
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Name of Engineer (Type or Print)	Signature of Engineer	Date
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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 at [www.austintexas.gov/ser](http://www.austintexas.gov/ser)

**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 & 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.**