

City of Austin - Austin Water Utility
Commercial Water/Wastewater Tap Permit Application

Applicant Instructions and TAP Conditions:

I hereby apply for a tap connection to the water and/or wastewater system at the service address noted on this application. If any of the information I have provided is incorrect, I understand that I may have to pay capital recovery fees or other costs associated with relocation of water or wastewater connections. For properties outside the City limits of Austin, permanent water and/or wastewater service and the setting of a permanent water meter requires passing a final plumbing inspection. Any water meters set or water and/or wastewater service provided prior to passing this inspection are considered temporary services, and these services may be discontinued without notice and may not be resumed until inspection requirements are met. Separate applications are required for separate dwellings on same property (detached or not).

Tap Expiration:

The **Tap Permit will expire 2 years after the date of issue**; refunds will not be processed after the expiration date. To keep the tap permit active after the 2-year period, for properties inside Austin city limits, you must have a valid and active site plan or building permit. For properties outside the city limits, you must have a valid and active plumbing permit from the City of Austin and pay capital recovery fees. I authorize AWU to enter upon the above-described private property for the purpose any inspections related to this application.

Service Address: _____

Lot: _____ Block: _____ Subdivision/Land Status: _____

Attach plat date document from County records; If plat date not verified, current Impact Fee is charged. Plat Date: ____/____/____

TAP purchaser's name: (PLEASE PRINT) _____

Name of person/company to whom the utility service(s) will be billed: _____

Company Type: Corporation: ___ LLC: ___ Partnership: ___ LLP: ___ Sole Proprietorship: ___

Tax ID#: _____

Mailing/Billing Address: _____ City: _____ State: _____ Zip: _____

Phone # (_____) _____ - _____; email address: _____

Requested domestic meter size(s): _____

Requested irrigation meter size(s): _____

Will premise be connected to the City Sanitary System? (Wastewater): Yes or No

Do you have any other water sources? Yes ___ No ___ (examples: wells, rain barrels or reclaimed water that provide water to toilets)

If yes, explain: _____

If switching from a "well" to COA, ask about RPZ requirements.

All required fields on the application must be completed before the TAP can be processed/sold.

NOTE: By signing this form you understand and agree to instructions and TAP conditions. Applications will not be processed without a signature; an emailed application implies your signature.

Title _____ Printed Name _____ Signature _____

Applicant's Phone Number (_____) _____ Applicant's email: _____ Date ____/____/____