



17425 Ballinger Way NE
 Lake Forest Park, WA 98155
 Phone: (206) 368-5440 Fax:
 (206) 364-6521

OFFICE USE ONLY	
Application Date	
Application Number	
Certificate Availability Fee	\$100.00
Amount Received	\$

Certificate of Sewer Availability

Type of Project (Single Family Residents, Subdivision, etc.): _____

Number of New Connections: _____ Site Address: _____

Parcel Number(s): _____

Owner of Record: _____

Contact Name: _____ Contact Phone: _____

OFFICE USE ONLY		
Sewer Information (To Be Completed By Sewer District)		
<input type="checkbox"/> Sewer service will be provided by connection to an existing _____ size sewer _____ feet from the property line and the sewer system has the capacity to serve the propose use.		
Or sewer service will require an improvement of:		
<input type="checkbox"/> _____ feet or sewer trunk or lateral to reach the property line.		
<input type="checkbox"/> Pressure System:		
<input type="checkbox"/> Other: _____		
Sewer service is subject to the following:		
<input type="checkbox"/> Connection Charge		
<input type="checkbox"/> Easement(s) <input type="checkbox"/> As-builts:		
<input type="checkbox"/> Other		
<p><i>I, representative of the Lake Forest Park Sewer District, hereby certify that the above information is true. This certification is valid for one year from date of signature.</i></p>		
_____	_____	_____
Name	Title	Date