**Will Service Application**

**5455 W. Old Highway Road, Mtn. Green, UT 84050,**

**Office 801.876.3416**

Owner (name/phone/email)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact (if different) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parcel ID: \_\_\_\_\_\_\_\_\_\_\_\_

Number of ERU’s (homes) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee $ 150.00 + (# ERU over 10: \_\_\_\_\_\_\_ X $10) = Fee $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Standby Fee $ 100 X # ERU’s \_\_\_\_\_\_\_ = + Standby Fee $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Fees for Will Service Application Total Fees $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_ **(*initial*)** Concepts drawings attached/emailed:

*Concept drawings shall include at a minimum a concept lay-out of the sewer main lines and laterals with sufficient detail so as to reasonably verify slope and depth of the sewer lines relative to area grades. The submitted drawings are to follow all applicable federal, state and local laws as necessary for approval. In the event a water main is to be installed, that must be shown on the plans as well to ensure the minimum separation is maintained.*

\_\_\_\_\_\_ **(*initial*)** I and the project (as shown above) will comply with MGSID standards. I recognize an annual stand-by fee will be due from my approval date or prior. The annual standby fee is due on all lots completed or not (Including lots that have paid impact fees) until the monthly fee is paid consistently. Failure to pay annual standby fee will result in cancellation of current will service agreement. Any significant changes to the concept drawing will subject the will service to additional review.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ : Printed name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_: Date \_\_\_\_\_\_\_\_\_\_\_\_

**Staff processing only:**

**Acknowledged/Received by Staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_Fees Paid: \_\_\_\_\_\_\_\_\_\_\_\_**

**Will Service: \_\_\_\_\_ Approved \_\_\_\_\_ Not approved Date approved by board \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date will service start/ #ERU / year \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Notes/Special conditions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**