



Capacity Reservation Request Form

Request for Water Well Capacity Reservation and/or Wastewater Plant Capacity Reservation

Date: _____ Service Requested: Water Well _____ Sewer Plant _____

Name of Project: _____ Area (Acres): _____

Project Address: _____

***THIS INFORMATION IS REQUIRED TO PROCESS APPLICATION (attach location map):**

Type Development: Residential _____ Commercial _____ Industrial _____ Other _____

(Explain) _____

Number and/or Size of Units: _____

Estimated Flow: (Average Day) Water _____ Sewer _____

How will water and/or sewer be provided if not from ECUA? _____

Special Requirements: _____

Owner of Property: (type or print) _____

Address: _____ Phone: _____

Developer: (type or print) _____

Address: _____ Phone: _____

Engineer: (type or print) _____

Address: (type or print) _____ Phone: _____ Email: _____

Submitted By: (type or print) _____ Title: _____

Signature of Submitter: _____ Title: _____

FOR ECUA USE ONLY:

Water Zone: North _____ South _____

Wastewater Treatment Plant: Bayou Marcus _____ CWRP _____ Other _____

*****Note: This form does not address water distribution or sewer collection systems issues or capacities; instead, it only concerns water well production and/or wastewater treatment plant capacities.**