



Indian Valley Community Services District

“Providing services for our community health, well-being, and prosperity.”

REBUILDING APPLICATION

Full Name

Date of Birth

Phone

E-mail

Service Address

City

State

Zip

Mailing Address

City

State

Zip

Date to Reestablish Service

Phone

Service Classification

Service Requested

Residential

Commercial

Water

Sewer

Both

Type of Dwelling

New Home

Modular

Fifth Wheel

None

Existing Well

Yes

No

Name of Architect/Engineer

Name of Contractor

Name of Fire Suppression Engineer

Assessor's Parcel Number (APN)

OFFICE USE ONLY

Does customer require back flow prevention device?

Yes No

Account Number _____

Location Number _____

Utility Manager Approval _____ Date _____

Board of Directors

Wanda Carpenter | Andrew Meyers | Susan Doran | Kristine Gorbet | Mary Cronin | General Manager, Adam Cox

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