



## Request for Will Serve Letter

Date: \_\_\_\_\_  
Name of Property Owner: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_  
Email: \_\_\_\_\_

### **Property Information**

Legal Description \_\_\_\_\_  
(Include Section, Township and Range)  
Property Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Number of Acres: \_\_\_\_ Planned Use: \_\_\_\_ Residential \_\_\_\_ Commercial \_\_\_\_ Industrial  
Number of Taps Anticipated: \_\_\_\_ Construction Schedule: \_\_\_\_\_  
Property is presently included in the District (subject to property tax levy) \_\_\_\_ yes \_\_\_\_ no

### **Letter Addressee Information**

This Will Serve letter needs to be sent to: (if different than above)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**Please Email, mail or fax this completed request to:** St. Vrain Sanitation District  
11307 Business Park Circle Firestone, CO 80504 or Fax to (303) 485-1968  
www.stsan.com

(Allow 7-10 days for your request to be processed)