



# Application REQUEST FOR UTILITY SERVICES (PIR)

Submit to: **Permit Center Engineering Counter**  
415 W 6<sup>th</sup> ST, Vancouver, WA 98660  
PO Box 1995, Vancouver, WA 98668

Phone (360) 487-7804  
[CityCDDEng@cityofvancouver.us](mailto:CityCDDEng@cityofvancouver.us)  
[www.cityofvancouver.us](http://www.cityofvancouver.us)

Today's Date:

TYPE OF UTILITY <i>(Check all that apply)</i>		
<input type="checkbox"/> Water	<input type="checkbox"/> Sewer	<input type="checkbox"/> Stormwater

OCCUPANCY TYPE				
<input type="checkbox"/> Single-Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Restaurant

PROPERTY INFORMATION	
Property address:	
Suite/bldg./apt #:	
Project name:	
Tax Assessor Serial Number:	
Nearest intersection if no site address:	

ADDITIONAL PROPERTY INFORMATION			
<b>Residential:</b>	# of existing units:		# of proposed units:
<b>Multi-Family:</b>	# of existing units:		# of proposed units:
<b>Commercial / Industrial:</b>	# of existing units:		# of proposed units:
<b>Restaurant:</b>	# of existing seats:		# of proposed seats:

GENERAL CONDITIONS FOR UTILITY SERVICE
<b>Comments:</b>

APPLICANT INFORMATION			
*Completed utility reviews will be e-mailed to applicant unless otherwise specified*			
Applicant Name:			
Address:			
City/State/Zip:			
Phone:		Fax:	
E-mail:			