



# REQUEST FOR WATER SYSTEM HOT TAP



**ALLOW UP TO THREE (3) BUSINESS DAYS TO PROCESS REQUEST**

Park City Municipal Corporation, Engineering Department, 445 Marsac Ave/PO Box 1480, Park City, UT 84060  
435-615-5073 [engineering\\_submittals@parkcity.org](mailto:engineering_submittals@parkcity.org) [www.parkcity.org](http://www.parkcity.org)

## PROJECT INFORMATION

TODAY'S DATE:		PROJECT ADDRESS/LOCATION:	
PROPOSE TAPPING DATE:		PROJECT START TIME:	PROJECT END TIME:
TYPE OF WORK: <input type="checkbox"/> NEW CONSTRUCTION (Residential) <input type="checkbox"/> NEW CONSTRUCTION (Commercial) <input type="checkbox"/> RENOVATION/REHABILITATION*			
SERVICE LINE SIZE:		SERVICE LINE MATERIAL:	

*Hot taps will only be scheduled between 8 and 12 PM, Monday through Thursday. Approval is subject to previously scheduled work. Park City reserves the right to restrict, modify, or deny application to minimize interruption of water service and to protect public health.*

*\*Will require abandonment of existing service line at the water main.*

*\*Work shall comply with the City 2021 Supplemental Standards and Specifications.*

## REQUIREMENTS

SITE PLAN SUBMITTED

**OTHER PERMITS** For Example  WORK IN ROW PERMIT  BUILDING  PARTIAL ROAD CLOSURE  PARKING

*If other permits are required, it is the responsibility of the applicant to obtain the forms needed to avoid a STOP WORK ORDER.*

## GENERAL CONTRACTOR'S INFORMATION

CONTRACTOR'S NAME:	MAILING ADDRESS:
EMAIL ADDRESS:	24 HOUR PHONE #:

*I certify that all work will be completed in accordance with Park City's Construction Standards and Conditions of Permit Approval. I acknowledge that as the General Contractor I am responsible for the full cost of any repairs.*

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## TAPPING CONTRACTOR'S INFORMATION

CONTRACTOR'S NAME:	TECHNICIAN'S NAME:
MAILING ADDRESS:	

**PRE-INSPECTION MUST BE ARRANGED 24 HOURS IN ADVANCE WITH ENGINEERING**

## OFFICE USE ONLY

APPROVED ON:	DAY OF	20	APPROVED BY:
<input type="checkbox"/> Engineering Approval <input type="checkbox"/> Water Operations' Approval <input type="checkbox"/> Valves located and accessible <input type="checkbox"/> Copy to Applicant			
Approved hot tap date: _____		Time: _____	