

Service Review

BARTLETT WEST
EXPERTS IN THE BARTLETT & WEST WAY

TO BE COMPLETED BY WATER SUPPLIER

Water Supplier's Name:

Rural Water Dist 7 Osage Co

Applicant's Name:

Date:

Section Township Range

Is this a typical domestic user? ☐ Yes ☐ No

If not, please estimate gallons used per month:

COMMENTS:

Please indicate location of the meter on this 1/4 Section Block.

NE	NW	SE	SW
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1/4 Section

TO BE COMPLETED BY ENGINEER

Distance from Existing Pipe Line Meter Elevation

Expected Pressure: Maximum psi; Minimum psi

Recommended for Service? ☐ Yes ☐ No

Pressure Regulator? ☐ Recommended ☐ Not Necessary

COMMENTS:

The maximum and minimum pressures are estimated based on conditions as of the date of the Service Review. These pressures may change with future additions and changes to the system.

REVIEWED BY

Date:

P.N. 3952.2