

NEW AGREEMENT ENTITY AND CONTACT INFORMATION

Today's Date: _____ New (or proposed) Ownership Date: _____

1. Is project part of a CFD? **No** **Yes, provide CFD#** _____ **Lead Agency:** _____**2. If this is an assumption, was project purchased with all assets and liabilities:****No** (Please provide Grant Deed and Letter on Letterhead from master developer advising they will be completing facilities)**Yes** (Please provide Grant Deed and Purchase agreement with assignment of assets/liabilities highlighted)**3. Were New Conditional of Approval issued by the City:** **No** **Yes** (If yes, please provide a copy)**4. Have you been approved for on-site recycle water use:** **No** **Yes, If water purveyor is RCWD or WMWD,**
please provide a copy of your Application and receipt reflecting payment of On-Site Recycled Inspection deposit for your project._____
Project Name_____
Tract Number and Lot Number(s)_____
Entity Name (Legal Owner)_____
Company Street Address_____
Company Mailing Address (if different from above)_____
Contact Name_____
Phone Number_____
Contact Title_____
Contact E-mail_____
Signature**---BILLING INFORMATION---(Complete Only if different from above)**_____
Billing Address_____
Accounts Payable Contact Name_____
Phone Number_____
Contact Title_____
Contact E-mail**ADDITIONAL REQUIREMENTS:**

Please provide copies of the following:

*If you have a signature block, please provide a copy on a word doc

*Copy of the Tract Map and/or Parcel map