

# RESIDENTIAL NEW CONSTRUCTION PACKET CITY OF VERO BEACH UTILITIES

Telephone: (772) 978-5100

## ***Construction Application Requirements***

***Please read all documents carefully and include the documentation with your application***

### **Instructions for completing residential application packet:**

New Construction Account Information – **Complete and return this form at the time of application** – This form provides Customer Service with the information required to set up a new location and account and to calculate the fees required for application.

New Construction Account / Tear Down / Rebuild – **Complete and return this form at the time of application if applicable** – This form provides Customer Service with the information required to calculate any credit(s) that may be applicable.

Water Meter Sizing and Sewer Connection for Residential Service – **Complete and return this form at the time of application** – This form provides Customer Service with the information required to determine the minimum size water meter and to calculate the fees required for application.

### **Required Application Information / Documentation**

- Building Permit – Actual Permit or Copy – \* Permit numbers **NOT** acceptable \*
- Plumber's name and telephone number
- Irrigation Service—The gallons per minute of the largest irrigation zone (25 or 30 gpm for example) must be provided on the application
- All fees are to be paid at the time of application for service.
- **Mail to:**  
City of Vero Beach  
P.O. Box 1389  
Vero Beach, FL 32961-1389
- **email to :**  
custsvc@covb.org
- **Fax to :**  
(772) 978-5125

**NOTE:** If there is Temporary Utility Service for Construction, it is still necessary to make an application for the permanent service.

**It is critical that the information given at the time of application is complete and accurate. Inaccurate or incomplete information will cause delays in the installation of the meters and may result in additional service charges being applied. Keep this copy for your records.**

### **WATER OR IRRIGATION SERVICE - TEMPORARY & PERMANENT SERVICE**

- The customer must complete a service application at the address shown above.
- A service order will be routed to Water & Sewer Department
- Water & Sewer Department will schedule date and time meter will be set

**All water and irrigation meters must have an appropriate backflow prevention device installed prior to a meter being set.**

**All water meters larger than 2" to be purchased and installed by the developer subject to approval by Water and Sewer.**

**\*For specific information, please call Water & Sewer (772) 978-5220**

**The Customer Service staff **CANNOT** provide a date or time for the installation of any meter and/or utility service.**

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**New Construction – Account**

Information Sheet – Residential

If this application is for a rebuild / remodel – please complete the Residential Tear Down / Rebuild form.

APPLICANT'S NAME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ CELL NO.: \_\_\_\_\_

ACCOUNT HOLDERS NAME: \_\_\_\_\_

BILLING ADDRESS: (Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Business/ Property Owner Information

Owner's Name & Number \_\_\_\_\_  
(Name) (Cell Phone# or Other Contact #)

Owner's Drivers License No. \_\_\_\_\_ State: \_\_\_\_\_ DOB: \_\_\_\_\_

TELEPHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_

ACCOUNT CONTACT PERSON: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ CELL NO.: \_\_\_\_\_

**NEW SERVICE INFORMATION**

Job Description: (i.e. Temporary Service to build Single Family Residence – Tear/Down re-build Single Family Residence -- Temporary Service for Construction Trailer – Permanent Service for \_\_ - Temporary to Permanent Service for\_\_ etc

NO. BLDGS \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

OWNER: \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

Temporary Water  Permanent Water

Plumber's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Total Square Footage: \_\_\_\_\_

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**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**New Construction – Account  
Information Sheet – Residential Tear Down / Rebuild**

Please provide all service information for the structure(s) that have been or will be torn down. This information will be used to calculate any credit(s) that may be due.

**APPLICANT'S NAME:** \_\_\_\_\_

**CONTACT PERSON:** \_\_\_\_\_ **TEL. NO.:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_ **CELL NO.:** \_\_\_\_\_

**ACCOUNT HOLDERS NAME:** \_\_\_\_\_

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**EXISTING SERVICE INFORMATION**

(For rebuild / remodel on an existing building)

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**Water Meter Size:** \_\_\_\_\_ **”** **Irrigation Meter Size:** \_\_\_\_\_ **”**

**Water Meter Size:** \_\_\_\_\_ **”** **Irrigation Meter Size:** \_\_\_\_\_ **”**

**Water Meter Size:** \_\_\_\_\_ **”** **Irrigation Meter Size:** \_\_\_\_\_ **”**

**Sewer Service:** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

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**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Water Meter Sizing and Sewer Connection Information  
For Residential and Multi-Dwelling Service Applications**

DATE: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

OWNER: \_\_\_\_\_ SERVICE ADDRESS: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

SERVICE LOCATION: CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ INDIAN RIVER SHORES \_\_\_\_\_

SINGLE LIVING UNIT \_\_\_\_\_ MULTI-DWELLING HOUSE MTR \_\_\_\_\_ NUMBER OF UNITS \_\_\_\_\_

PRIVATE FIRE LINE: NO \_\_\_\_\_ YES \_\_\_\_\_ SIZE \_\_\_\_\_

CITY SEWER \_\_\_\_\_ SEPTIC TANK \_\_\_\_\_ PRIVATE LIFT STATION \_\_\_\_\_

IRRIGATION SYSTEM: NO \_\_\_\_\_ CITY \_\_\_\_\_ WELL \_\_\_\_\_ NON POTABLE \_\_\_\_\_

DEMAND FOR LARGEST IRRIGATION ZONE: \_\_\_\_\_ Gallons Per Minute

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Please enter the number of fixtures in the spaces provided

Bathtub \_\_\_\_\_ Toilet Tank \_\_\_\_\_ Kitchen / Veg Sink \_\_\_\_\_ Washing Machine \_\_\_\_\_

Shower \_\_\_\_\_ Urinal \_\_\_\_\_ Dish-washer \_\_\_\_\_ Laundry Tub \_\_\_\_\_

Bidet \_\_\_\_\_ Wet Bar \_\_\_\_\_ Hose Bib \_\_\_\_\_ Shower & Bathtub Combo \_\_\_\_\_

Lavatory \_\_\_\_\_

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**Comments:**

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I certify that the information contained on this form is complete and accurate. I understand that if the information furnished is incomplete or inaccurate, the City may withhold or discontinue service until the correct information is furnished and the correct size meter is installed.

\_\_\_\_\_  
Name Printed

\_\_\_\_\_  
Signature