



Community and Economic Development
Environmental Health Division

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Deputy Director

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Public Water System Plan Check Application

SECTION I – PROPOSED WATER SYSTEM

Name of Proposed Water System: _____

Physical Location Address: _____

APN: _____

SECTION II – OWNER INFORMATION

Owner Name: _____ Phone: _____

Fax Number: _____ Email Address: _____

Owner's Mailing Address: _____

SECTION III – ENGINEER INFORMATION

Representative: _____
(Name) (Title)

Business Address: _____

Email Address: _____

Phone Number: _____ Fax Number: _____

The plan check service fee may include water system plan check review, Senate Bill 1263 Preliminary Technical Report, or water system modification and any communication regarding the plan check progress. This service does not include a water system inspection or water supply permit. No work is to begin on the proposed project until a plan review and report approval letter is provided by this Division. If additional time is required beyond what is described in the Environmental Health Fee Schedule, an hourly rate of \$129.00 will be applied.

- | | |
|--|------------|
| <input type="checkbox"/> 4628 - Plan Check-Community Water System (15-199 connections) | \$1373 |
| <input type="checkbox"/> 4629 - Plan Check Non-Transient, Non-Community Water System | \$1373 |
| <input type="checkbox"/> 4630 - Plan Check-Non-Community Water System | \$1045 |
| <input type="checkbox"/> 4631 - State Small Water System (5-14 connections) Modification | \$522 |
| <input type="checkbox"/> 4800 - SB 1263 Preliminary Technical Report | \$129/hour |

Division Use Only

SR: _____
 IN: _____
 PAID ON: _____

Comments:

Email: