

AGREEMENT ENTITY AND CONTACT INFORMATION



PROJECT PROCESSING REQUIREMENTS:	<p>Documents can be emailed to DSCoordinationGroup@emwd.org. and a Copy of Agreement Entity and Contact Information Form must be included with payment. A Complete submittal must include all items noted below to proceed with the agreement process:</p> <ol style="list-style-type: none"> 1. New agreement processing fee of 2. Completed Agreement and Contact Information Form 3. Copy of Grant Deed and/or Purchase Agreement with Assigment 4. Copy of Tract Map/Parcel Map 5. Copy of signature block on a word doc <i>(if required)</i>. 6. If the ownership entity is an LLC <i>(provide a list of the major participants, or a signature authority letter)</i>.
PROJECT INFORMATION:	<p>Project Title: _____</p> <p>Is project part of a CFD? <input type="checkbox"/> No <input type="checkbox"/> Yes, provided CFD#: _____ Lead Agency: _____</p> <p>For purchase or assumption of an existing project:</p> <p><input type="checkbox"/> Purchase of lots only for build out, provide letter from Master Developer, advising they will be completing facilities under original COs.</p> <p><input type="checkbox"/> Purchase of project in full, provide letter from new developer assuming Standard Facilities Agreement dated _____, inclusive of any punchlist items required for completion and acceptance of said facilities.</p> <p>New Conditions of Approval (COA) issued by land agency: <input type="checkbox"/> No <input type="checkbox"/> Yes, provide a copy of new COAs.</p> <p>Is project approved for on-site recycled water use: <input type="checkbox"/> No <input type="checkbox"/> Yes, if water purveyor is RCWD or WMWD, provide a copy of your application and receipt, reflecting payment of On-Site Recycled Inspection deposit for the project.</p>
CONTACT INFORMATION:	<p>Entity Name (Legal Owner): _____ Ownership Date: _____</p> <p>Company Street Address: _____</p> <p>Company Mailing Address (if different from above): _____</p> <p>Contact Name: _____ Contact Phone Number: _____</p> <p>Contact Title: _____ Contact E-mail: _____</p> <p>Signature: _____ Date: _____</p>
BILLIING INFORMATION (If Different from mailing address):	<p>Billing Address: _____</p> <p>Contact Name: _____ Contact Phone Number: _____</p> <p>Contact Title: _____ Contact E-mail: _____</p>