



AWWU REQUIRED INFORMATION FOR PRE-PLATTING

Project Case Number o	⁻ Subdivision	Name:	
Project Location, Tax ID	, or Legal De	escription:	
Is this parcel located wit	hin AWWU's	certificated service area?	Y /
Is a water key box located on each parcel?			Y /
Does this service meet DCPM Standard?			Y /
Is sewer stubbed to each parcel?			Y /
Does this service meet DCPM Standard?			Y /
Are there any water or sewer connections that require removal?			Y /
Are there any additional easements needed?			Y /
Have any Private System plans been submitted for review?			Y /
Are any of the lots subje	ect to extende	ed connection or other agreements?	? Y /
Does this platting action	consolidate	a previously connected (on-propert	y)
parcel with an unassess	ed parcel? -		Y /
	as balances m	assessment area, please populate th nay change year to year, this table rep	
	Levied	Assessment Balance	Year
Water Lateral	Y / N		
Water Transmission	Y / N		
Sewer Lateral	Y / N		
Sewer Trunk	Y / N		

Comments: •

Verified By (AWWU):

Date:

Anchorage Water & Wastewater Utility

