



## Thurston County Environmental Health Division

2000 Lakeridge Dr. SW, Olympia, WA 98502

(360) 867-2673 / (360) 867-2660 (Fax)

TDD Line (360) 867-2603

<http://www.co.thurston.wa.us/health/ehadm>

### WATER SYSTEM PRIORITY OF SERVICE

☐ Owner/Applicant ☐ Applicant Only Date Received \_\_\_\_\_

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Mailing Address \_\_\_\_\_

Property Address \_\_\_\_\_ Parcel # \_\_\_\_\_  
(attach location map)

Project Description (Plat, short plat, etc) : \_\_\_\_\_

**Primary Source Area Utility** \_\_\_\_\_

**Priority I-Area Utility** \_\_\_\_\_

- ☐ Yes, the applicant will be provided with terms of service
- ☐ Yes, via area utility satellite service
- ☐ No (Go to Priority Level II)

Signature of Utility Representative \_\_\_\_\_ Date \_\_\_\_\_

**Priority II- Neighboring Utility** \_\_\_\_\_

- ☐ Yes, the applicant will be provided with terms of service
- ☐ Yes, via neighboring utility satellite service
- ☐ No (Go to Priority Level III)

Signature of Utility Representative \_\_\_\_\_ Date \_\_\_\_\_

**Priority III- Other Approved Satellite Service Company** \_\_\_\_\_

- ☐ Yes
- ☐ No (Go to Priority Level IV)

Signature of Utility Representative \_\_\_\_\_ Date \_\_\_\_\_

**Priority IV- Water Supply Developed by Applicant**

\_\_\_\_\_  
Signature of Thurston County Environmental Health Representative

### Approval of Service

\_\_\_\_\_  
Signature of Thurston County Environmental Health Representative

To obtain a list of approved utilities, and the name of your primary area utility, contact the Thurston County Environmental Health Representative.