



CITY OF DES MOINES BUILDING DIVISION

**WATER
AVAILABILITY
R-003**

21630 11th Avenue South, Ste D • Des Moines, Washington 98198 • Tel: (206) 870-7576 Fax: (206) 870-6544

CERTIFICATE OF WATER AVAILABILITY

This form must be completed and signed by personnel from the appropriate agency to insure adequate water availability. The completed form must then be returned to the City of Des Moines Building Department as part of your application packet. This certificate provides the Engineering Department with information necessary to evaluate development proposals.

Applicant:

Phone:

Proposed Use:

Property Address:

(Attach map and legal description if necessary)

- Building Permit
 Short Subdivision
 Preliminary Plat or Subdivision
 Rezone or Other

Presently Des Moines is served by the following water departments:

North of South 252nd Street:

Highline Water District
23828 30th Avenue South
Kent WA 98032

206-824-0375

King County Water District #54
922 South 219th Street
Des Moines WA 98198

206-878-7210

South of South 252nd Street:

Lakehaven Utility District
31623 First Avenue South
Federal Way WA 98063

253-945-1580

WATER PURVEYOR INFORMATION

1. A. Water can be provided by service connection only to an existing size _____ water main _____ feet from the site.
- B. Water service will require an improvement to the water system of:
 1. _____ feet of water main or lateral to reach the site; and/or
 2. The construction of a distribution system on the site; and/or
 3. Other (describe) : _____

THIS SECTION MUST BE COMPLETED IF #1.B IS CHECKED ON PREVIOUS PAGE

2. Service is subject to the following:
- A. The water system is in conformance with a county approved water comprehensive plan.
 - B. The water system improvement will require a water comprehensive plan amendment.
- 3.
- A. The proposed project is within corporate limits of the district, or has been granted Boundary Review Board approval for extension of service outside the district or city, or is within the county approved area of a private water purveyor.
 - B. Annexation of BRB approval will be necessary to provide service.
4. A. Water is/or will be available at the rate of flow and duration indicated below at no less than 20 psi measured at the nearest fire hydrant _____ feet from the property (or as marked on the attached map):

RATE OF FLOW

DURATION

Available Fire Flow GPM _____ Hours

Comments: _____

I hereby certify that the above water purveyor information is true. This certification shall be valid for one (1) year from the date of signature.

Agency: _____

Approved By: _____ Date: _____

Signature and Title