

**SEWERAGE ESTIMATE REQUEST FORM**  
**DEPARTMENT OF ENGINEERING**  
1221 ELMWOOD PARK BLVD SUITE 801 JEFFERSON LA 70123  
OR FAX TO 504-736-6526 – (A CURRENT SURVEY MAY BE REQUIRED)  
**THIS FORM MUST BE COMPLETELY FILLED OUT**

DATE \_\_\_\_\_

ADDRESS OF ESTIMATE \_\_\_\_\_

LOT # \_\_\_\_\_ SQ.# \_\_\_\_\_ SUB. \_\_\_\_\_

REQUESTED BY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

REASON FOR REQUEST \_\_\_\_\_

STANDING IN STREET FACING HOUSE, INSTALL HOUSE CONNECTION ON:

LEFT \_\_\_\_\_ RIGHT \_\_\_\_\_ MIDDLE \_\_\_\_\_ LOOK FOR STAKE \_\_\_\_\_

MEET APPLICANT ON JOB SITE \_\_\_\_\_ CALL TO SET TIME \_\_\_\_\_

COMMENTS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

----- DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY -----

REQUEST NO. \_\_\_\_\_

UNIT SHEET MAP# \_\_\_\_\_

REQUEST TAKEN BY \_\_\_\_\_ APPROVED \_\_\_\_\_

(SEE ATTACHMENT)