



Garberville Sanitary District
PO Box 211
919 Redwood Dr.
Garberville, CA. 95542
Office(707)923-9566 Fax(707)923-3130

CONDITIONAL WILL SERVE AGREEMENT
FOR AGRICUTURAL WATER USE

DATE: _____

CUSTOMER NAME: _____

CONTACT INFORMATION:

PHYSICAL ADDRESS: _____

MAILING ADDRESS: _____

Email: _____

Phone #(Home) _____ **(Business)** _____

Cell Phone# _____

Do you prefer calls or texts? _____

EMERGENCY CONTACT PERSON: _____

Phone # _____

DESCRIBE COMMERCIAL ACTIVITY

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

PRODUCTS TO BE CULTIVATED, MANUFACTURED OR DISPENSED:

TOTAL SQUARE FOOTAGE OF "IRRIGABLE" LAND UNDER CULTIVATION:

ESTIMATED WATER USE DEMANDS IN GALLONS PER MONTH AND YEAR:

GARBERVILLE SANITARY DISTRICT AGREEMENT

Garberville Sanitary District agrees to provide water for commercial agricultural, manufacturing, research or distribution at **(ADDRESS)** _____
(APN#) _____ as long as water is monitored monthly through a separate Garberville Sanitary District approved water meter.

REQUIREMENTS NOW AND IN THE FUTURE:

1. Customer pays a new connection fee for agricultural water meter.
2. Install an agricultural water meter approved by GSD Manager or designee.
3. Provide a site plan.
4. Provide an operational plan.
5. Provide a copy of your County application or permit.
6. Fill out annual GSD application for reporting and monitoring.
7. Include \$150 with annual application for handling and site visit from GSD management.
8. Comply with all water ordinance conditions and requirements now and in the future.
9. Provide annual reconciliation report for water use efficiency.
10. Notify Garberville Sanitary District of any changes in agreement or water use demands.

If the above requirements and conditions are not met, this “Will Serve” letter will be revoked and the commercial agricultural water meter will be turned off and locked out until compliance is achieved and approved by the General Manager or designee.

CHECK EVERY BOX THAT APPLIES:

- I am providing accurate information.
- I will only use GSD water as stated in this agreement.
- I have read this agreement and agree to the terms, conditions and requirements.
- I understand that violation of this agreement will result in termination of water service.
- I have a County approved permit or have a permit pending.

******Please contact Garberville Sanitary District for questions or clarification******

APPROVED BY:

Ralph Emerson

**General Manager
Garberville Sanitary District**

Owner-Applicant Signature:

Date:
