LEUCADIA WASTEWATER DISTRICT

APPLICATION FOR SEWER PLAN CHECK AND CONSTRUCTION PERMIT

<u>Name of District</u> :	Leucadia Wastewater Dis 1960 La Costa Avenue Carlsbad, Ca 92009 760-753-0155 Telephone 760-753-3094 Facsimile	
Name of Applicant	:	
Address:		
Assessor Parcel No.		
Telephone:		_Fax:
Email:		
Name and/Or Desc	ription of Project:	
<u>Project Location</u> : _		
Contractor:		
A .] .]		
		_Fax:
Engineer: Address:		
		_Fax:
Signature of Applica	ant:	
Dated:		