

## UTILITY VERIFICATION FORM

This form along with a sketch showing the location of the item(s) to be constructed, with measurements to the lot lines, must be provided to the *Department of Public Utilities - 618 South 2nd Street, Virginia, MN 55792*. **Incomplete forms will not be processed.**

<b>REQUESTED BY (Name)</b>	
<b>PROPERTY ADDRESS</b>	
<b>LEGAL DESCRIPTION OF PROPERTY (OPTIONAL):</b>	
<b>TYPE OF CONSTRUCTION TO BE PERFORMED:</b>	
<b>HEIGHT OF ITEM TO BE CONSTRUCTED:</b>	
<b>IS A VARIANCE REQUIRED?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>WHEN COMPLETED, I WOULD LIKE TO (please check one):</b>	<input type="checkbox"/> Have the form sent to City Hall, Engineer's Office  <input type="checkbox"/> Be notified so I may pick up completed form

**SIGNATURE OF PROPERTY OWNER:** \_\_\_\_\_

**DATE:** \_\_\_\_\_      **DAYTIME PHONE NUMBER:** \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – FOR OFFICIAL USE ONLY**

<u><b>LOCATION OF UTILITIES</b></u>	
1.	STEAM _____ WATER: _____ GAS: _____ ELECTRIC: _____ <div style="text-align: center;">(Overhead or Underground)</div> Services verified by: _____ <div style="text-align: center;">Department of Public Utilities</div>
2.	SANITARY SEWER _____ Services verified by: _____ <div style="text-align: center;">City Engineering Department</div>