

**CITY OF FRANKLIN**  
**WATER AVAILABILITY & LOCATION VERIFICATION**

Date of Request: \_\_\_\_\_ Time of Request: \_\_\_\_\_

Name of Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Location (Exact location is required)

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Number, Lot	Street/Road	Subdivision
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**Type of Structure:**

Single Family Dwelling       Multiple Family Dwelling (specify # of units) \_\_\_\_\_

Commercial Building       Other (Explain on an additional sheet)

**Applicant is to Fill Out Top Portion Only!**

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Water Available    Water PSI \_\_\_\_\_

Water Available with Stipulations (See Comments Below)

Water Not Available (See Comments Below)

Refer to Simpson County Water District

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Signature of Superintendent/Designee	Date	Time
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**Comments:**

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**Provide a sketch of water lines on lot. This is to prevent a building being built over any utility lines.**