



Request for Information Water & Sewer Utilities

CONTACT INFORMATION	
Company: _____	Date: _____
Contact Name: _____	
Email Address: _____	Phone: _____

PROJECT/PARCEL INFORMATION
Assessor's Parcel Number(s) (APN) and/or Project Limits (attach a map and label the area where you are requesting information for):

REQUESTED INFORMATION
Describe the information being requested (be as specific as possible):

Please allow up to two weeks for processing of the requested information.

For questions, please contact our Engineering Department at: engineering@mswd.org or (760) 329-6448 ext. 127.

