



Charlotte County Utilities Pre-Application Meeting Checklist

Name of Applicant/Engineer: _____

Mailing Address: _____

City, State, Zip: _____

Phone Number: _____ Fax: _____

Name of Project: _____

Owner of Project: _____

Street Address of Project: _____

Type of Project: _____

STRAP Number: _____

Current Zoning: _____ Acreage: _____

Number of Buildings/Units: _____

Yes	No	N/A	
			Utility Master Plan
			Proposed Variance
			Letters of Availability Request Form
			Completed Water Flow Test Application
			Force main connection pressure request

CCU Utility Forms:

<https://www.charlottecountyfl.gov/departments/utilities/about-utilities/forms.stml>