

**STATE OF CALIFORNIA**  
**APPLICATION**  
**FOR**  
**DOMESTIC WATER SUPPLY PERMIT**  
**FROM**

Applicant: Toon Town Water District  
(Enter the name of legal owner, person(s) or organization)

Address: 457 Loopy Lane

System Name: Toon Town Water District

System Number: 1234567

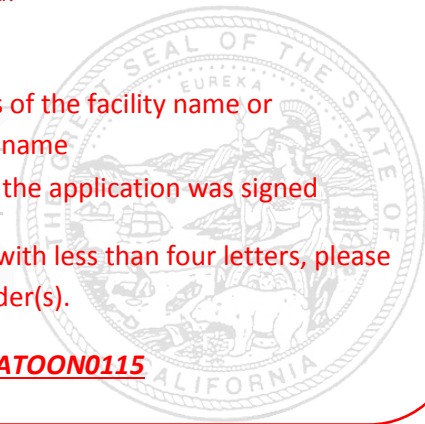
TO: (District Engineer Name)  
(Name of District) District Engineer  
State Water Resources Control Board  
Division of Drinking Water  
(Address)

For Drinking Water Application, please enter in the Application Number field:

- DA
- First four letters of the facility name or individual's last name
- Month and Day the application was signed

For facility or last name with less than four letters, please use 0 (zero) as place holder(s).

Application Number = DATOON0115



Pursuant and subject to the requirements of the California Health and Safety Code, Division 104, Part 12, Chapter 4 (California Safe Drinking Water Act), Article 7, Section 116525, relating to domestic water supply permits, application is hereby made for a domestic water supply permit to operate \_\_\_\_\_

(Applicant should state the type of system, e.g., community,

transient-noncommunity, or nontransient-noncommunity, and the proposed area of services. This application will also be used

for a change in ownership application.

FOR OFFICIAL USE

Date Received:

I (We) declare under penalty of perjury that the statements on this application and on the accompanying attachments are correct to my (our) knowledge and that I (we) are acting under authority and direction of the responsible legal entity under whose name this application is made.

By: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Dated: \_\_\_\_\_