



601 N. Moapa Valley Boulevard * Post Office Box 257 * Logandale, Nevada * 89021
 Telephone (702) 397-6893 * Facsimile (702) 397-6894
 Email: contact@moapawater.com

Date: _____ Property Owner _____ Interested Buyer _____ Realtor _____

Customer Name: _____ APN: _____

Email: _____ Phone: _____

Description: _____

Description of Estimate: _____

NDOT Encroachment Permit:	\$ _____	County Encroachment Permit:	\$ _____
Water Dedication Ordinance:	\$ _____	Engineering Estimate:	\$ _____
Reimbursement Area:	\$ _____		
Total Estimated Cost:	\$ _____	Estimate Expiration Date:	_____

Estimated By: _____ Title: _____

Employee Signature Date

Please initial the following:

_____ I understand that this is an informal (rough) estimate only, and as such will not be used for construction purposes.

_____ I understand a formal detailed estimate is required with payment received before any construction would begin.

_____ I understand if I require a formal detailed estimate there will be a \$25.00 processing fee.

Customer Signature Date

_____ I require a formal detailed estimate for my project.

Processing Fee received: \$ 25.00 Cash _____ Credit Card _____ Check # _____

Customer Signature Date

Employee Signature Date