



**LOS ANGELES COUNTY PUBLIC WORKS
WATERWORKS DIVISION
NORTH MAINTENANCE AREA • LANCASTER**



UNLOCK REQUEST FORM

www.lacwaterworks.org • (661) 940-9270

EMAIL: wwnmaeng@dpw.lacounty.gov

FAX: (661) 726-1478

Tract _____ **Requested Turn-On Date** _____

Owner/Developer _____

Contact Name _____ Phone No. _____

Email _____ Fax No. _____

Sub-Contractor _____

Contact Name _____ Phone No. _____

Email _____ Fax No. _____

Signature

Date

I hereby request that the water meter(s) be unlocked and turned-on at the address(es)/lot number(s) listed below. I understand that as the owner/developer or designated representative (see the attached, signed Customer Order Form) I am responsible for all water bills effective the date of turn-on and thereafter until we notify the District in writing requesting discontinuance of service.

LOT	ADDRESS	CORRECTIONS

OFFICE USE

Engineer _____

Date _____

Inspector _____

Request No. _____

Unlocked _____

Mapped _____

CIS _____