

PLACER COUNTY  
**LOCAL AGENCY FORMATION COMMISSION**

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**OUT-OF-AGENCY SERVICE AGREEMENT APPLICATION**

1. Title of proposal:
2. Agency to provide service:
3. Service to be provided:
4. Site address:
5. Assessor parcel number:
6. Is the parcel developed?
7. What is the existing use of the site?
8. Is the property within the service agency's sphere of influence?
9. Is this request in response to an emergency health and safety situation? If yes, please provide written documentation.
10. Will the site be annexed to the service agency in the future? If yes, when? If not, why not?
11. Describe in detail how the service will be extended to the property. For example, describe needed improvements, distance to connections, improvement costs, connection costs, and how costs will be financed.
12. Please provide a copy of the environmental documents.
13. Please provide a copy of the contract or agreement between the property owner and the agency including future annexation agreement (if applicable), agency staff reports, and other supporting documentations related to this application.
14. Please provide a map exhibit showing the subject property, the agency's boundary, and the agency's sphere of influence in the vicinity of the subject property.
15. Landowner or representative name, phone number, and e-mail: