



Republic of the Philippines  
**City of Koronadal Water District**  
 Block 1, Casa Subdivision, City of Koronadal  
 Tel Nos. (083) 228-4049/ 228-8141

**SERVICE APPLICATION AND CONSTRUCTION ORDER (SACO)**

**APPLICANT**

Surname \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 Birthday (dd/mm/yy)        
 Address: (Where service connection is to be installed)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Contact Nos. Home: \_\_\_\_\_  
 Office: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

**Sketch of Service Connection**

**CONFORME**

I understand that the connection will not be made until it is approved and all charges are paid. I assume full responsibility for the meter and all water that passes through the meter. I will conform to the rules and regulation of City of Koronadal Water District.

\_\_\_\_\_  
 (Print Name & Sign)  
 Applicant

I hereby bind myself to pay any unpaid water bills of the occupant in case he/she vacates the premises permanently.

\_\_\_\_\_  
 (Print Name & Sign)  
 Property Owner

New     Additional \_\_\_\_\_     Transfer  
 Landmarks: \_\_\_\_\_  
 Neighbors: \_\_\_\_\_

**DO NOT FILL-UP - FOR OFFICE USE ONLY**

**WATER METER**

Brand: \_\_\_\_\_  
 Meter No.: \_\_\_\_\_  
 Account #: \_\_\_\_\_  
 Initial Reading: \_\_\_\_\_  
 Date Installed: \_\_\_\_\_

**WAREHOUSE**

SRS No.: \_\_\_\_\_  
 Issued by: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_  
**JOB CONTRACT No.** \_\_\_\_\_  
 Issued to: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

Instruction to Installer: \_\_\_\_\_  
 \_\_\_\_\_

Photo copy of two (2) valid ID's

- Drivers License
- Proof of Billing
- Barangay Certificate
- Cedula
- Postal ID
- Passport / SSS / PHIC
- Senior Citizen ID

Others: \_\_\_\_\_  
 \_\_\_\_\_

Inspection Report \_\_\_\_\_  
 Inspected By: \_\_\_\_\_  
 Estimated By: \_\_\_\_\_

Investigation of Applicant's Location:  
 System is Available     Yes     No

Availability of Applicant's Plumbing Installation:  
 Yes     No

- Residential     Commercial \_\_\_\_\_
- Industrial     Government \_\_\_\_\_

Size of Connection  
 1/2     3/4     Others \_\_\_\_\_

Type of Connection  
 Single     Dual  
 F-Type     Cluster

Estimates: \_\_\_\_\_  
 \_\_\_\_\_

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Verified by \_\_\_\_\_ Date \_\_\_\_\_

**Installation Charges**

Service Fee	P	_____
Estimation/Application		_____
Materials:		_____
Notarial		_____
Bond (if applicable)		_____
Total Charges		_____
Mode of Payment		_____
OR Number		_____

**Approved for Installation**

**REY J. VARGAS**  
 General Manager