



BLUE LAKE SPRINGS MUTUAL WATER COMPANY

1011 Blagen Road
P.O. Box 6015, Arnold CA 95223
209-795-7025 · FAX 209-795-7019
EMAIL: info@blsmwc.com

PRESSURE WASHING PERMIT

(1) OWNER INFORMATION (PLEASE PRINT)

LOT: _____ UNIT: _____

OWNER NAME(S): _____

PROPERTY ADDRESS: _____
STREET CITY STATE ZIP

MAILING ADDRESS: _____
STREET CITY STATE ZIP

PHONE NUMBER: HOME: (____) _____ CELL: (____) _____ ALT: (____) _____

E-MAIL: _____

(2) CONTRACTOR INFORMATION (PLEASE PRINT)

CONTRACTOR NAME(S): _____

MAILING ADDRESS: _____
STREET CITY STATE ZIP

PHONE NUMBER: HOME: (____) _____ CELL: (____) _____ ALT: (____) _____

E-MAIL: _____

(3) DETAIL OF WORK PERFORMED

DATE(S) OF WORK: ____/____/____

START

____/____/____

END

AREA WASHED:

☐ DECK

☐ HOUSE

ADDITIONAL NOTES: _____

FOR INTERNAL USE ONLY:

☐ APPROVED GENERAL MANAGER'S SIGNATURE: _____

☐ DECLINED REASON FOR DECLINE: _____