As part of a building permit application, it is required to supply the WPCA with the following information as it applies to your property and/or business.

Property Location______________________________________________ Unit#________________

IS PROPERTY CONNECTED TO SEWER? [ ] YES [ ] NO (If no, stop here)

Business Name______________________________________________ Phone #________________

Type of Business____________________________________________________________________

Hours of Operation___________________ Number of Days per Week___________________

Contact Person__________________________ Phone #__________________________

Preferred Email Address______________________________________________

Property Owner___________________________________Phone #______________

Prior Tenant or Business Name ____________________________________________

Est. water usage per day in gallons __________ Connected to public water? [ ] YES [ ] NO

Number of Employees, Full-time_________ Part-time___________ Washing Machines________

Grease (FOG*) producing? [ ] YES [ ] NO Grease trap or oil/water separator? [ ] YES [ ] NO

(*FOG: Fats, Oils, Grease)

If school/club/gym, number of registered students/clients__________ Swimming Pool? [ ] YES [ ] NO

Number of public: Sinks____ Toilets____ Urinals____ Showers____

If restaurant, seating capacity_______ Seasonal Seating (patio) ______ # Months_______________

If restaurant, separate bar? [ ] YES [ ] NO Bar seating capacity___________

______________________________________________ __________________________

PROPERTY OWNER SIGNATURE (REQUIRED) DATE

Do not write below this line

Date of this Survey: _____________ Date of Occupancy: _____________ WPCA Account #: _____________

Notes:____________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

Inspector Name:__________________________ Signature:__________________________

Unit Charges _________ Calculated by__________________________ Date__________

Unit Charges Calculation____________________________________________________________