

BROOKFIELD WATER POLLUTION CONTROL AUTHORITY

(203) 775-7319 Fax (203) 775-2614

Website: www.brookfieldwpc.org Email: office@brookfieldwpc.org

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 _____