

OWNER and ADDRESS of Property to be served: _____
 Application prepared by: _____ Phone No: _____
 Sanitary Sewer Connection to be Construction by: _____ License No: _____
 Address: _____ Phone No: _____

Type of Facility to be Served: _____ (Residence, Apartments, Restaurant, Retail Store, Etc.)

Fixture unit equivalents shall be calculated using the following schedule and shall apply to "stubbed in" or "roughed in" fixture units as well as those fixtures being installed.

FIXTURE	FIXTURE UNITS*	NO. OF UNITS	TOTAL FIXTURE UNITS	FIXTURE	FIXTURE UNITS*	NO. OF UNITS	TOTAL FIXTURE UNITS
Bathtub	2	X _____	= _____	Drinking Fountain	1	X _____	= _____
Floor Drain	2	X _____	= _____	Garbage Disposal	1	X _____	= _____
Interceptors for grease, oil, solids, etc.	3	X _____	= _____	Interceptors for sand, auto wash	6	X _____	= _____
Laundry tubs	2	X _____	= _____	Clothes washer	2	X _____	= _____
Shower, single stalls	2	X _____	= _____	Sink, service	3	X _____	= _____
Sink, bar, private (1.5" min waste)	1	X _____	= _____	Urinal, wall (2" min waste)	2	X _____	= _____
Sink, commercial, including dishwashers, wash-up sinks and wash fountains	3	X _____	= _____	Sink and/or dishwashers (residential) (2" min waste)	2	X _____	= _____
Wash basin (lavatory) single	1	X _____	= _____	Wash basin, in sets	2	X _____	= _____
Water closet, tank type	4	X _____	= _____	Water closet, flush valve type	6	X _____	= _____
Trailer park trap (one for each trailer)	6	X _____	= _____	Others: _____		X _____	= _____
Others: _____		X _____	= _____	Inspection fee	= \$ _____		
		X _____	= _____	Lift station fee	= \$ _____		
TOTAL NUMBER OF FIXTURE UNITS (FU)	_____			Plant Investment Fee First 18 FU (minimum):	= \$ _____		

* In accordance with Uniform Plumbing Code, Latest Edition, by International Association of Plumbing & Mechanical Officials

The undersigned agrees with the Fountain Sanitation District that they will comply with the Rules and Regulations of the District; that they will perform all work in a satisfactory manner and does indemnify and hold harmless the District from any liability, loss or damage accruing from the work. In the event of violation of any rule, regulation, or law of the District, State of Federal agencies the District may summarily revoke the permit.

Additional FU = _____ @ \$ _____ = \$ _____
 Total Plant Investment Fee Due = \$ _____

A permit is hereby issued by the Fountain Sanitation District for the above described connection to the district's sewage system and receipt of the applicable tap fee is hereby acknowledged. This permit expires six months from Date of Issue unless otherwise terminated or cancelled in accordance with District Rules and Regulations.

FOUNTAIN SANITATION DISTRICT (By): _____

Applicant: _____ Date: _____

Date of Issue: _____ Date of Expiration: _____