

CITY OF GRANTS PASS



Commercial and Public Development Sewer Use Certification (Effective Jan 1, 2019)

To be completed for all new sewer connections, reconnections, additions or change-of-use of existing connections. This form does not apply to repairs or replacements of existing sewer connections.

Pursuant to City Ordinance No. 5301, all sewer customers who establish a new service which uses City-owned sewage facilities shall be subject to a System Development Charge. The City Council has established the amount of the charge at **\$3,179 per equivalent residential unit**. The purpose of the charge is to recover costs of providing sewage system capacity for new sewer customers. The charge is collected at the time of permit to connect to the system. Questions regarding the charge or this form can be referred to the City Community Development Department at (541) 450-6060

(Please print or type)

Owner's Name (Last, First, Middle Initial):

Date of Application:

Property Legal Address:
Assessor's Map#: Tax Lot#

Sewer Connection Permit #:

Street Address:

For City Use Only:

Account #:

Monthly Rate Class:

Other:

City, State, Zip:

Owner's Contact Information:

Phone Number:

Mailing Address (if different from above):

A. Fixture Units

Number of Fixtures x Fixture Units = Total Fixture Units
(Public or Private)

Kind of Fixture	Fixture Units		No. of Fixtures		Total Fixture Units
	Public	Private	Public	Private	
Bathtubs and/or shower	4	2			
Dental units or lavatory	1	0			
Dishwasher, commercial	4	0			
Drinking fountain (each head)	1	0			
Hose bibb or sill cock	5	3			
Laundry tub or clotheswasher	4	2			
Sink, bar, or lavatory	2	1			
Sink, clinic, flushing	10	0			
Sink, kitchen	4	2			
Sink, other	4	2			
Sink wash, circle spray	4	0			
Urinal, flush tank	3	0			
Urinal, pedestal	10	0			
Urinal, wall or stall	5	0			
Water closet tank	5	3			
Water closet, flush valve	10	6			

Total Fixture Units:

Equivalent Residential Unit (ERU): 20 Fixture Units equals 1.0 ERU

Total No. of Fixture Units = A: ERU

B. Other Wastewater Flow (In Addition to Section A)

Type of Facility/Process:

Estimated Wastewater Discharge (Gallons per Day):

Equivalent Residential Unit (ERU): 187 gallons per day equals 1.0 ERU

Total Discharge (gal/day) = B: ERU

C. Strength Factor (Circle the appropriate class)

Domestic: 1.00 High: 1.40

D. Total Equivalent Residential Units (Use Sections A,B,C)

A: + B: = D:
D: x C: = ERUs:

If the property is located in the Redwood Sanitary Sewer Service District, please indicate the WATER METER SIZE here: _____

I certify that the information given is correct. I understand that the System Development Charge levied will be based on this information and any deviation will require resubmission of corrected data for determination of revised charge.

Signature of Owner or Owner's Agent: Printed Name: Date:

CITY OF GRANTS PASS



Residential Sewer Use Certification

To be completed for all new sewer connections, reconnections, additions or change-of-use of existing connections. This form does not apply to repairs or replacements of existing sewer connections.

Pursuant to City Ordinance No. 5301, all sewer customers who establish a new service which uses City-owned sewage facilities shall be subject to a System Development Charge. The City Council has established the amount of the charge at \$3,179 per equivalent residential unit. The purpose of the charge is to recover costs of providing sewage system capacity for new sewer customers. The charge is collected at the time of permit to connect to the system. Questions regarding the charge or this form can be referred to the City Community Development Department at 450-6060.

(Please print or type)

Owner's Name (Last, First, Middle Initial):	Date of Application:
Property Legal Address: Assessor's Map# Tax Lot #	Sewer Connection Permit #:
Street Address:	For City Use Only: Account #: Monthly Rate Class: Other:
City, State, Zip:	
Owner's Contact Information: Phone Number:	
Mailing Address (if different from above):	

Please check the appropriate box:

<input type="checkbox"/>	Single Family	1.0	Equivalent Residential Unit (ERU)			
<input type="checkbox"/>	Duplex (0.8 ERU per unit)	1.6	Equivalent Residential Unit (ERU)			
<input type="checkbox"/>	3-Plex (0.8 ERU per unit)	2.4	Equivalent Residential Unit (ERU)			
<input type="checkbox"/>	4-Plex (0.8 ERU per unit)	3.2	Equivalent Residential Unit (ERU)			
<input type="checkbox"/>	5 or more (0.64 ERU per unit)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 150px;">No. of Units:</td> <td style="width: 20px; text-align: center;">x 0.64 =</td> <td style="border: 1px solid black; width: 80px;"></td> </tr> </table>	No. of Units:	x 0.64 =		Equivalent Residential Unit (ERU)
No. of Units:	x 0.64 =					
<input type="checkbox"/>	Mobile Home (1.0 ERU per space)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 150px;">No. of Spaces:</td> <td style="width: 20px; text-align: center;">x 1.0 =</td> <td style="border: 1px solid black; width: 80px;"></td> </tr> </table>	No. of Spaces:	x 1.0 =		Equivalent Residential Unit (ERU)
No. of Spaces:	x 1.0 =					

If the property is located in the Redwood Sanitary Sewer Service District, please indicate the NUMBER OF TOILETS here: _____

I certify that the information given is correct. I understand that the System Development Charge levied will be based on this information and any deviation will require resubmission of corrected data for determination of revised charge.

Owner's Signature:	Date:
Name of Owner:	