

**INDIAN RIVER COUNTY
DEPARTMENT OF UTILITY SERVICES**

**MAJOR USER WASTEWATER AND/OR WATER
UTILITIES CONSTRUCTION PERMIT
APPLICATION FORM**

A. APPLICANT

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE () _____

B. OWNER/AUTHORIZED REPRESENTATIVE (IF DIFFERENT FROM APPLICANT)

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE () _____

C. PROJECT

PROJECT NAME _____

PARCEL ID _____

LEGAL DESCRIPTION _____

TYPE OF PROJECT _____

HOURS OF OPERATION _____

ANTICIPATED CONSTRUCTION SCHEDULE START/FINISH _____

ESTIMATED CONSTRUCTION COST OF
FACILITIES TO BE DEDICATED TO IRC:

WATER (LABOR & MATERIALS ONLY) \$ _____

SEWER (LABOR & MATERIALS ONLY) \$ _____

HAS PROJECT HAS BEEN REVIEWED BY PLANNING BOARD, PRE-
APPLICATION AND TECHNICAL REVIEW COMMITTEES YES _____
NO _____

PRE-APPLICATION AND/OR PROJECT No. ASSIGNED BY PLANNING BOARD
No. _____

ALL PROJECTS WILL REQUIRE AN ENGINEERING REPORT SUBMITTED WITH THE UTILITY APPLICATION PERMIT DEFINING THE PROPOSED PROJECT'S IMPACT ON THE INDIAN RIVER COUNTY DEPARTMENT OF UTILITY SERVICE SYSTEM _____(INITIAL)

THE SCOPE OF THE ENGINEERING REPORT SHALL BE DEPENDENT ON THE COMPLEXITY OT THE PROPOSED PROJECT FOLLOWING CUSTOMARY ENGINEERING STANDARDS. GUIDELINES WILL BE MADE AVAILABLE AT THE INDIAN RIVER COUNTY DEPARTMENT OF UTILITY SERVICE _____(INITIAL)

D. METHOD (S) OF FLOW DERIVATION (CHECK APPROPRIATE LINE (S))

- () EQUIVALENT RESIDENTIAL UNIT DETERMINATION TABLE
- () SPECIFIC REQUIREMENTS FOR INDUSTRIAL USE
- () EXISTING FACILITY/PREVIOUS RECORDS

1. ERU DETERMINATION TABLE (COPY ATTACHED):

TYPE OF ESTABLISHMENT _____

SQUARE FEET _____

APPLICABLE UNITS _____

WATER:
PROJECTED FLOW _____(ERUs) x 250 GALLONS / DAY = _____ GPD(ADF)

WASTEWATER:
PROJECTED FLOW _____(ERUs) x 250 GALLONS / DAY = _____ GPD (ADF)

2. SPECIFIC INDUSTRIAL USE:

TYPE (S) OF USE _____

WATER:
PROJECT FLOW _____

WASTEWATER:
PROJECT FLOW _____

3. EXISTING FACILITY/PREVIOUS RECORDS:

THE INDIAN RIVER COUNTY UTILITIES DEPARTMENT MAY CONSIDER THE PAST RECORDS OF AN EXISTING OPERATIONAL FACILITY FOR DETERMINING PROPOSED FLOW REQUIREMENTS FOR A NEW DEVELOPMENT, PROVIDED THE APPLICANT SUBMITS SUFFICIENT INFORMATION TO ALLOW THE DEPARTMENT TO DETERMINE ANTICIPATED FLOW. THIS INFORMATION SHALL INCLUDE, BUT NOT BE LIMITED TO, TWENTY-FOUR MONTHS OF PREVIOUS WATER BILLS AND A COMPLETE LISTING OF THE DIFFERENCES IN THE EXISTING AND PROPOSED FACILITY SUCH AS SIZE, HOURS OF OPERATION, TYPE OF USES, NUMBER OF EMPLOYEES, ETC.

E. GENERAL:

ADDITIONAL WATER FLOW ANTICIPATED FOR PROJECT PHASING, BUT NOT REQUESTED

(ESTIMATED) _____

ADDITIONAL WASTEWATER FLOW ANTICIPATED FOR PROJECT PHASING, BUT NOT REQUESTED

(ESTIMATED) _____

HIGH STRENGTH WASTE - YES* _____ NO _____

* IF YES, COMPLETE AN INDUSTRIAL WASTE PERMIT APPLICATION

B O D (BIOCHEMICAL OXYGEN DEMAND) _____

S S (SUSPENDED SOLIDS) _____

PHOSPHORUS _____

F. OTHER REQUIREMENTS:

1. WILL THE DEVELOPMENT UTILIZE THE FOLLOWING?

RETROFIT EXISTING PLUMBING FIXTURES WITH WATER SAVING DEVICES _____ YES _____ NO

IRRIGATION REUSE SYSTEMS _____ YES _____ NO

IF YES, PLEASE ATTACH A STATEMENT CERTIFIED BY A PROFESSIONAL ENGINEER REGISTERED IN THE STATE OF FLORIDA INDICATING THE EXTENT OF SAVINGS, TO INCLUDE SUPPORTING THE DOCUMENTED HISTORICAL DATA.

PLEASE NOTE: MANUFACTURERS LITERATURE IS NOT ADEQUATE.

2. ZONING

EXISTING ZONING ON PROPERTY TO BE DEVELOPED _____

IS EXISTING ZONING APPROPRIATE FOR PROPOSED DEVELOPMENT?
_____ YES _____ NO

3. PLATTING

IS THE PROPERTY PLATTED APPROPRIATELY TO SUPPORT THE PROPOSED DEVELOPMENT? _____ YES _____ NO

IF YES, PLEASE INDICATE THE PLAT BOOK AND PAGE NUMBER

PLAT BOOK _____ PAGE _____

4. FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

IS A WATER OR SEWER EXTENSION REQUIRED? _____ YES _____ NO

IF YES, THE APPLICANT MUST OBTAIN THE REQUIRED FDEP PERMIT PRIOR TO THE ISSUANCE OF A COUNTY PERMIT

5. SITE PLAN

YOU ARE REQUIRED TO SUBMIT A SITE PLAN INDICATING ANY ON OR OFF-SITE SANITARY SEWER AND/OR POTABLE WATER LINE CONSTRUCTION AND THE POINT OF CONNECTION(S) TO THE COUNTY'S EXISTING SANITARY SEWER AND/OR POTABLE WATER SYSTEM.

6. ITEMS SUBMITTED WITH CHECK LIST

- PROPERTY APPRAISERS MAP/EQUIVALENT (FOR LOCATION)
- SITE PLAN (REQUIRED)
- BUILDING PLANS
- FDEP PERMIT APPLICATION WITH CONSTRUCTION PLANS AND SPECIFICATIONS

7. SEE ATTACHED PROJECT CHECKLIST OF ITEMS REQUIRED FOR FINAL PROJECT C.O.

SIGNED _____ DATE _____

TYPE OR PRINT _____
APPLICANT: NAME AND TITLE