

**Water & Sewer Service Application & Business
Questionnaire**

**Multi-Family (Duplex or more) / Commercial / Industrial /
Fire / Irrigation / Construction**

IMPORTANT

**WATER METER(S) WILL NOT BE
SCHEDULED FOR INSTALLATION**

AND

**SIDE SEWER CONNECTION(S) WILL
NOT BE APPROVED**

**UNTIL THE ATTACHED INFORMATION
IS COMPLETED, RETURNED, AND
APPROVED BY THE ALDERWOOD
WATER & WASTEWATER DISTRICT
WATER QUALITY DIVISION AND
PRETREATMENT DIVISION**

DO NOT DELAY

Alderwood Water & Wastewater District

Multi-Family (Duplex or more)/Commercial/Industrial/Fire/Irrigation/Construction
Application for Water and/or Sewer Service and Business Questionnaire

WATER METER(S) WILL NOT BE SCHEDULED FOR INSTALLATION AND SIDE SEWER CONNECTION(S) WILL NOT BE APPROVED UNTIL THE ATTACHED INFORMATION IS COMPLETED, RETURNED, AND APPROVED BY THE ALDERWOOD WATER & WASTEWATER DISTRICT WATER QUALITY DIVISION AND PRETREATMENT DIVISION.

RETURN THE ORIGINAL AND TWO (2) COPIES OF THIS COMPLETED FORM TO:

ALDERWOOD WATER & WASTEWATER DISTRICT
Attn: Engineering Department
3626 156th ST SW
Lynnwood, WA 98087

Engineering: 425-743-4605 Fax: 425-742-4562
Water Quality: 425-787-0250 425-745-0420
Pretreatment: 425-787-1940 425-742-5279

Today's Date _____ Developer Ext # _____

Meter Application # _____ Side Sewer Application # _____

Service Address _____

Property Owner _____ Phone #: _____ () _____

Mailing Address _____

Mailing City _____ State _____ Zip Code _____

The undersigned applicant hereby applies for district water connection(s) to the above-described property. The applicant is the owner of the described property or the authorized agent of the owner. By signing this application, the applicant agrees, as a condition of Alderwood Water and Wastewater District providing and continuing water and/or sewer service to the above described property, to fully and completely comply with all regulations and requirements set forth by Resolutions adopted by the Board of Commissioners of the Alderwood Water and Wastewater District including, but not limited to, Resolution Number 2385-2000 dated July 17, 2000 (or latest revision thereof), Resolution Number 937-2002 dated December 2, 2002 (or latest revision thereof), and other such rules and regulations now existing or which may be established from time to time governing the Alderwood Water and Wastewater District public water system.

The applicant understands that there shall be separate water service connections for fire systems and domestic water systems (other than flow-through fire protection systems that are supplied only by the purveyor's water; do not have a fire department pumper connection; are constructed of approved potable water piping and materials to which sprinkler heads are attached; and terminates at a connection to a toilet or other plumbing fixture to prevent the water from becoming stagnant). Separate water service connections may also be required for irrigation systems.

The applicant understands that the District's sewerage system is a sanitary sewer system and agrees that he will not at any time connect storm water drainage from any source to the District's system; this includes, but is not limited to: Roof downspouts, Building footing drains, Springs on the property, Any ground or surface water drains. In addition, industrial and commercial wastes may require pretreatment and/or special approvals by other agencies prior to discharge to the public system. Required approvals must be obtained prior to issuance of authorization to connect the above property to the sewer system.

The applicant specifically agrees to install and maintain at all times their plumbing system in compliance with the most current edition of the Uniform Plumbing Code having jurisdiction as it pertains to the prevention of water system contamination, prevention of pressure surges and thermal expansion in their water piping, and installation of traps and interceptors on sewer piping. For thermal expansion, it shall be assumed that Alderwood Water and Wastewater District has installed a check valve on the water service pipe.

Further, the applicant agrees not to make a claim against Alderwood Water and Wastewater District or its agents or employees for damages and/or loss of production, sales or service, in case of water pressure variations, or the disruption of the water supply for water system repair, routine maintenance, power outages, and other conditions normally expected in the operation.

APPLICANT'S NAME _____ APPLICANT SIGNATURE _____
Please Print

Alderwood Water & Wastewater District

Multi-Family (Duplex or more)/Commercial/Industrial/Fire/Irrigation/Construction
Application for Water and/or Sewer Service and Business Questionnaire

<input type="checkbox"/> New Water Connection	<input type="checkbox"/> Tenant Improvement	This site is:
<input type="checkbox"/> New Sewer Connection	Building permit #: _____	<input type="checkbox"/> Single Unit
<input type="checkbox"/> Existing Connection: Change in Occupant/ Business	Permit issued by: _____	<input type="checkbox"/> Multi-Unit (Attach Multi-Commercial Addendum)

Today's Date _____ Developer Ext # _____

Meter Application # _____ Side Sewer Application # _____

Project Name _____

Business Name _____

Business Type _____

UBI Number _____

Site Address _____

City _____ State _____ Zip Code _____

Property Owner _____

Mailing Address _____

Mailing City _____ State _____ Zip Code _____

Contact Person _____ Title _____

Phone # ____ (____) _____ Fax # ____ (____) _____

Name of Person Completing this Form _____

When completing the following information, use additional sheets if necessary.

GENERAL INFORMATION

- (1) Indicate if your facility has, or will have, any of the following and whether there will be discharge to the sanitary sewer from the process.

	The following processes are/will be present		The following discharges to sanitary sewer	
	Yes	No	Yes	No
Air conditioning system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aquarium make-up water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aspirator, chemical (Herbicide, pesticide, weedicide)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aspirator, Medical/lab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autoclave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Autopsy table	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auxiliary Water System (Well, pond, creek, other)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baptismal fountain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathtub, below rim filler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedpan washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beverage dispenser (post-mix CO ₂)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boiler feed lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boiler Blow down lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Booster Pump(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottle washing equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Box hydrant (irrigation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building three stories or more tall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Car wash / Vehicle wash rack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical feed tank for industrial process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical feed (commercial cleaners)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlorinators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer cooling lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condensate tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling towers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decorative ponds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Degreasing equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental equipment / cuspidors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dialysis equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dye vats and tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Etching tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fermenting tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fertilizer injection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Film processors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire department pumper connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire system (with booster pump)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire system (without chemicals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire system (with antifreeze or chemicals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fume hoods (lab)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Garbage can washers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat exchanger (other than double wall with leak path)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High pressure washer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot tub (direct water connection)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot water heating boilers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ext. No. _____

Questionnaire Date: _____

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(1) Cont.

	The following processes are/will be present		The following discharges to sanitary sewer	
	Yes	No	Yes	No
Hydrotherapy baths	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ice makers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial fluid systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation system (no chemicals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Irrigation system (chemical)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laundry machines (commercial)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Livestock drinking tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Make-up tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Photo developing sinks / tanks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pump prime lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiant heat system (with chemicals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiant heat system (no chemicals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiator flushing equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational vehicle sewage dump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Restaurant/Cafeteria/Food Service Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solar water heating system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steam generating equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swimming pool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trap primers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used, reclaimed, or gray water systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X-ray equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(2) Does your business use, store, or mix liquid chemicals at this location? Yes No

(3) Please provide the information below for all products or chemicals that are mixed with water at your location:

Product/Chemical	Quantity on-site	Use
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(4) Please complete the information below for all products or chemicals that stored in bulk at this location (use additional pages is necessary):

Product/Chemical	Quantity on-site	Use
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Ext. No. _____

Questionnaire Date: _____

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WATER QUALITY

- (1) Are you aware of any existing backflow protection located at this property? Yes No

Please Describe: _____

PRETREATMENT

- (1) Total daily water usage: _____ gallons per day (gpd)
 If your company does not directly receive a water bill, the daily water usage must be estimated.
 Indicate the methods, and assumptions used to calculate your facility's water use.

- (2) Does this site have any of the following outlets to the sanitary sewer located in production, manufacturing, chemical storage, or waste storage areas?

	Yes	No
Floor Drains	<input type="checkbox"/>	<input type="checkbox"/>
Trenches	<input type="checkbox"/>	<input type="checkbox"/>
Catch Basins	<input type="checkbox"/>	<input type="checkbox"/>
Sump	<input type="checkbox"/>	<input type="checkbox"/>
Sink	<input type="checkbox"/>	<input type="checkbox"/>
Other: Specify _____	<input type="checkbox"/>	<input type="checkbox"/>

- (3) Will/Does this facility have a grease trap and/or grease interceptor for the removal of food grease? Yes No
- (4) Will/Does this facility have an oil/water separator for the removal of petroleum based oils? Yes No
- (5) Is any liquid waste from this site disposed by means other than discharge to the sanitary sewer? Yes No

If yes, complete the information below for those items:

Liquid Waste	Disposal Method	Quantity per month
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- Is an Accidental Spill Prevention Plan prepared for this site? Yes No

DISTRICT USE ONLY

Date of Staff Review _____ Developer Ext # _____

Meter Application # _____ Side Sewer Application # _____

Service Address _____

Property Owner _____ Phone #: _____ (_____) _____

Mailing Address _____

Mailing City _____ State _____ Zip Code _____

THIS SECTION TO BE COMPLETED BY THE WATER QUALITY DIVISION							
TYPE OF WATER USE	HAZARD ASSESSMENT		BACKFLOW PROTECTION REQUIRED				
	LOW	HIGH	DCVA	DCDA	RPBA	RPDA	LOCK
DOMESTIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IRRIGATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FIRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BACKFLOW REQUIRED?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	CCS INITIALS
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THIS SECTION TO BE COMPLETED BY THE PRETREATMENT DIVISION						
TREATING JURISDICTION	DISCHARGE DESIGNATION				DISCHARGE PERMIT REQUIRED	DISCHARGE AUTH REQUIRED
	CAT	SIU	MIU	NSU		
AWWD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
KING COUNTY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EVERETT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PERMIT/DA ISSUED?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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CONNECTION APPROVED?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	PTI INITIALS
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