



# Water and Wastewater Impact Fee Form

This form must be completed for all building permit requests\*\*

\*\*Single Family Homes are excluded

Please call Public Utilities (239) 252-4215 with any questions. FAX (239) 252-6727.

**Preparer's Information:**

Name =====> \_\_\_\_\_

Company =====> \_\_\_\_\_

Address =====> \_\_\_\_\_  
 \_\_\_\_\_

Phone =====> \_\_\_\_\_

Email Address =====> \_\_\_\_\_

**Project Information:**

Date =====> \_\_\_\_\_

Permit or AR Number \_\_\_\_\_

Name of Project =====> \_\_\_\_\_

Project Address =====> \_\_\_\_\_

\*Source for Data =====> \_\_\_\_\_

*\*Published, industry recognized, verifiable source must be used (Florida Administrative Codes, Land Development Codes, Ten State Standards, etc.)*

**Multi-Family Residential**

*Determine Flows in Gallons per Day (GPD)*

(attach additional sheets as necessary)

Domestic Demand			
	# of Units	ERC per unit	Total GPD
Multi-Family			(Units*ERC*350)
0 to 750 sq. ft.		0.33	
751 to 1500 sq. ft.		0.67	
1,501 to 4,999 sq. ft.		1	
Over 5,000sf or Over 4 toilets		Minimum of 1 ERC (1)	
Accessory Demand			
			Total GPD
	Quantity	Flow (GPD)	(Qty x Flow)
Clubhouse/Pool (2)			
Irrigation (2)			
Other (2)			

(1) Final ERC calculation for each unit determined by unit Fixture Value

(2) Calculation of Flows for these categories must be supplied on a separate sheet

**Grand Total GPD** \_\_\_\_\_

[Affix Engineering Stamp Here]

**Non Residential (Commercial, Institutional, etc.)**

*Determine Flows in Gallons per Day (GPD)*

(attach additional sheets as necessary)

Non Residential (Commercial, Institutional, etc.)					
Restaurant or Salon	Seats	Flow (GPD)			Total GPD
A.					
B.					
C.					
D.					
E.					
Medical Office	Practitioners	Flow (GPD)	Employees	Flow (GPD)	Total GPD
A.					
B.					
C.					
D.					
E.					
General Office	Square Feet	Flow (GPD)			Total GPD
A.					
B.					
C.					
D.					
E.					
Retail	Square Feet	Flow (GPD)			Total GPD
A.					
B.					
C.					
D.					
E.					
Accessory Demand / Other					Total GPD
Calculation of Flows for any item in this category must be supplied on a separate sheet. Enter total GPD for all items here =====>					

**Grand Total GPD** \_\_\_\_\_

Under penalties of perjury, I declare that I have entered and read the foregoing application information and that the facts stated are true:

\_\_\_\_\_  
 Type or Print Name of Engineer of Record for Project

\_\_\_\_\_  
 Signature of Engineer of Record for Project