



City of Adrian • Utilities Department • 135 E. Maumee Street • Adrian, Michigan 49221
 Phone • (517) 264-4821 Fax • (517) 266-4693 • www.ci.adrian.mi.us

Non-Residential Water and Sewer Customer Application for Service

The purpose of this document is to screen applicants for water and sewer service for the following: assurance size of service is adequate; determine impact fees and tap fees; determination if a water backflow device is needed; determination if an Industrial Pretreatment Permit is needed; determination of applicable Non-Residential Charge; determination if a pre-treatment device is needed.

1. Facility Name	Account Number	-	-	-
2. Property Address				
3. Mailing Address (if different from above)				
4. Name/Title of Authorized Representative of Facility			Phone	
5. Contact Person (if different from above)			Phone	
6. Brief Description of Operation				
7. Will there be an irrigation system?				Yes No
8. Will the facility use a grease trap? (restaurants only)				Yes No
9. Will there be any discharges into the sanitary sewers other than from a restroom facility at this location?				Yes No
10. If "yes", briefly describe the process(es) at this facility that has a discharge.				
11. Are there any uses of water other than typical residential use?				Yes No
12. If "yes", briefly describe water process(es).				
13. Size of Service Requested:		Water	5/8"	3/4"
(Please circle)		Sewer	1"	1 1/2"
			2"	4"
			6"	8"
14. Will there be fire suppression equipment? Yes No If "Yes", how many connections?				
15. Will there be any fire hydrants? Yes No If "Yes" how many?				
16. If you answered "no" to questions 8 and 9, you may sign and date this form and return it to the Utilities Department.				
17. If applicable, list Standard Industrial Classification(s) (SIC) at this facility.				
18. Source of supply water to facility:		City of Adrian	1	Well
			1	
19. Are roof drains connected to the Storm Sewer 1 Sanitary Sewer 1 Do Not Know 1				
20. Are floor drains connected to the Storm Sewer 1 Sanitary Sewer 1 Do Not Know 1				
21. Disposal Practices A) How are spent (used) chemicals disposed of at this facility?				
B) How do you dispose of spoilage?				

Certification Statement "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Signature _____ Title _____ Date _____

Note: Payment of impact fee and tap fee is required prior to building permit issuance. Applicants requiring Industrial Pre-Treatment Applications will not be approved until after submittal and review of application.

For Office Use Only

Water Service Size _____ Water Impact Fee _____ Water Tap Fee _____ Sewer Service Size _____ Sewer Impact Fee _____

Fire Service Connection Fee _____ Total Fees _____ Backflow Device Required 1 Pretreatment Device Required 1

The City of Adrian reserves the right to determine type and location of required Backflow devices or pretreatment devices.

Approved by: Chief Chemist _____ Office Mgr _____ Distribution/Collection _____ Utilities Director _____