



# Sewer/Water Adequacy for New/Revised Use

**Instructions:** **Applicant** Complete Section A. **Building Department** Complete Sections B and submit form to the Dutchess County Health Department. See other side for further instructions.

## SECTION A. PROJECT INFORMATION

Business name \_\_\_\_\_ Facility Name \_\_\_\_\_  
 Description of Use \_\_\_\_\_ Attach list of existing uses at this facility.  
 \_\_\_\_\_ Is facility being expanded?  See Side 2.

Tax Map # \_\_\_\_\_ Street Address \_\_\_\_\_ Location \_\_\_\_\_  
 (Town, Village, City)

Operator Name \_\_\_\_\_ Contact Information \_\_\_\_\_

Area (ft<sup>2</sup>) \_\_\_\_\_ Employees \_\_\_\_\_ Customers/Clients \_\_\_\_\_ Seats \_\_\_\_\_ Flow \_\_\_\_\_

Special equipment \_\_\_\_\_

Applicant \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

## SECTION B. BUILDING DEPARTMENT

Previous Use \_\_\_\_\_

Allowed Use \_\_\_\_\_ Reference \_\_\_\_\_

Other Facility Uses	Area ft <sup>2</sup>	Employees	Clients or Seats	Description	Equipment

Building Inspector \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

## SECTION D. FOR HEALTH DEPARTMENT USE ONLY

DCHD Project Number \_\_\_\_\_ Approval Date \_\_\_\_\_ Flow \_\_\_\_\_

SDS type \_\_\_\_\_ Water Source \_\_\_\_\_ PWS Number \_\_\_\_\_

DCHD Permits Required: \_\_\_\_\_ See other side for capacity worksheets.

Disposition:

DCHD Engineer: \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

DCHD Sanitarian: \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_

**(Uses requiring permits must be signed by a sanitarian.)**

**Basis of Design for Facility:**

Type	Design Flow (g/d)	Area (ft <sup>2</sup> )	Seats	Restrictions/Other

**Remaining Capacity:**

Type	Design Flow (g/d)	Area (ft <sup>2</sup> )	Seats	Restrictions/Other

**Directions**

The facility is the plaza or building or parcel into which the proposed use will be installed.

Include the E911 address (Suite number) of the proposed business.

The list of existing uses should include the same information required in Section A for each of the existing uses. See or use example table below in Additional Notes.

Special Equipment means any equipment which uses water, produces wastewater, or uses material which could contaminate the drinking water or wastewater.

Customers is per day. Seats is number.

Flow is water use in gallons per day. Explain how you arrived at the flow number (actual metered use, design book, guess?)

You may leave some entries blank. For instance, you do not need to enter both Customers and Seats. More complete information results in better and faster decisions.

Some projects may require supporting documentation including floor plans, plot plans, engineering plans, engineering reports, et cetera. Attach these to this form.

You may be required to retain the services of a New York State licensed professional engineer for your project.

A. When you are unable to properly specify the information in Section B.

B. When your proposed use is not already approved at the Facility you are intending to occupy.

Engineers who fill in Section A on behalf of a client must so note on the signature line of Section A.

There is no Section C yet.

The "Allowed Use" reference should be a reference to the Site Plan, minutes, or record of historical use supporting the determination of use.

**Facility Expansion**

New area proposed \_\_\_\_\_. Description of expansion:

**Comments:**