



ONSITE WATER REUSE SYSTEM (OWRS) OPERATING PERMIT APPLICATION

| | | | |
|------------------------|---|---|------------------------------------|
| New Permit Type: | <input type="checkbox"/> New Operating Permit | | |
| OR | | | |
| Existing Permit | <input type="checkbox"/> Permit Modification | | |
| Building Type: | <input type="checkbox"/> Commercial (Non-Residential) | <input type="checkbox"/> Multi-Family Residential | <input type="checkbox"/> Mixed-Use |
| Construction Type: | <input type="checkbox"/> New Construction | <input type="checkbox"/> Major Alteration | |
| Site Plan Permit #: | | Building Permit #: | |
| Property Address: | | | |
| Tax Parcel Number(s): | | | |
| District Scale System: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| LRT System | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

APPLICATION SUBMITTALS REQUIRED VIA THE CITY'S [AB+C PORTAL](#):

- I am submitting the project Water Balance Calculator: YES NO
- I am submitting the appropriate [Fee](#) for the application: YES NO
- I am submitting a project Engineering Report: YES NO
- I am submitting an Onsite Water Reuse Implementation Plan: YES NO N/A
(required for district-scale projects)

| | |
|--|--------|
| Applicant (<input type="checkbox"/> Owner <input type="checkbox"/> Developer) | Name: |
| Firm: | |
| Address: | |
| | |
| Phone Number: | email: |

| | |
|---------------|--------|
| Engineer: | Name: |
| Firm: | |
| Address: | |
| | |
| Phone Number: | email: |

