

GRAND TRAVERSE COUNTY DEPARTMENT OF PUBLIC WORKS
 2650 LAFRANIER ROAD
 TRAVERSE CITY, MI 49686-8972
 PHONE (231)995-6039
 FAX (231) 929-7226
pubworks@grandtraverse.org

RESIDENTIAL PERMIT APPLICATION

SEWER

WATER

#

TOWNSHIP _____ PROPERTY TAX ID _____ DATE _____

PROPERTY INFORMATION

NAME _____ ADDRESS _____ BUILDING/UNIT/LOT # _____

CITY _____ STATE _____ ZIP _____ PHONE # _____

NEW BUILDING EXISTING BUILDING HOME BUSINESS

Contractor/Excavator: _____ (NOTE: MUST HAVE CURRENT BOND ON FILE) PHONE# _____

BILLING INFORMATION (Same as Above? YES NO)

NAME _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE # _____ EMAIL _____

WATER SERVICE INFORMATION (EXISTING WELL? YES NO; Use for IRRIGATION YES NO; IF YES, PERMIT REQUIRED)

METER SIZE (See chart below for assistance) IRRIGATION YES NO

REQUESTED SERVICE LEAD SIZE

Type of Fixture	# of Units	Gpm/unit	Subtotal gpm	METER SIZE		
				TOTAL GPM	METER	
Household toilet	x	1.60	=	≤	25	5/8
Urinal	x	1.00	=	≤	55	1
Bidet	x	2.00	=	≤	100	1 1/2
Toilet (SLOAN TYPE – commercial grade)	x	1.00	=	≤	160	2
Bath Tub without shower	x	4.00	=	≤	400	3
Bath Tub with shower or shower only.	x	2.50	=	≤	800	4
Residential Sink/Lavatory	x	2.50	=	≤	1500	6
Laundry/Janitor Sink	x	3.00	=			
Irrigation/Sprinkler System (# of zones)	x	5.00	=			
Kitchen Sink	x	3.00	=			
Residential Dish Washer	x	2.75	=			
Washing Machine/Laundry tray	x	4.00	=			
TOTAL GPM			=			

SEWER SERVICE INFORMATION (EXISTING SEPTIC TANK? YES NO IF YES, OWNER MUST PROPERLY ABANDON SEPTIC TANK)

The foregoing information is certified to be true and accurate

BY PROPERTY OWNER or OWNER'S REPRESENTATIVE If Owner's Representative; Authorization included? YES NO

SIGNATURE _____ PRINT NAME _____

FOR DPW USE ONLY	
WATER	SEWER
Existing Lead <input type="checkbox"/> YES <input type="checkbox"/> NO Map Page# [] Lead # []	Existing Lead <input type="checkbox"/> YES <input type="checkbox"/> NO Map Page# [] Lead # []
If NO; <input type="checkbox"/> Short <input type="checkbox"/> Long <input type="checkbox"/> ROW Permit <input type="checkbox"/> DPW Tap/Cut []	If NO; <input type="checkbox"/> Short <input type="checkbox"/> Long <input type="checkbox"/> ROW Permit
Private Well Permit <input type="checkbox"/> YES <input type="checkbox"/> NO; If No, Abandoned <input type="checkbox"/> YES <input type="checkbox"/> NO	Septic Tank <input type="checkbox"/> YES <input type="checkbox"/> NO
Financing <input type="checkbox"/> YES <input type="checkbox"/> NO Contractor's Bond <input type="checkbox"/> YES <input type="checkbox"/> NO	Financing <input type="checkbox"/> YES <input type="checkbox"/> NO Contractor's Bond <input type="checkbox"/> YES <input type="checkbox"/> NO
Attach Witness <input type="checkbox"/> YES <input type="checkbox"/> NO Meter ok? <input type="checkbox"/> YES <input type="checkbox"/> NO	Attach Witness <input type="checkbox"/> YES <input type="checkbox"/> NO
METER HORN RECEIVED BY:	DATE: