

County of Volusia Utilities

Commercial Water/Sewer Service Application

EXAMPLE

Name: Better Health Medical Center

Mailing Address:

City: DeBary State: FL Zip Code:

Telephone: _____ fax: _____ email: _____

Applicant's Signature: _____ Date: _____

Service Location Address:

City: DeBary Zip Code: 32713

Tax Parcel #: 0000-00-00-0000

A. IMPACT FEE CALCULATION

| Type of Establishment | | | | | | Gallons/day |
|---|---------------------------------|-------|---|------|---|-------------|
| Barber & Beauty Shops per Service Chair | # of Service Chairs: | _____ | x | 0.3 | = | _____ |
| Doctor and Dentist offices | # of Practitioners: | 2 | x | 250 | = | 500 |
| add per additional employee | # of employees per 8 hr. shift: | 8 | x | 15 | = | 120 |
| Restaurant open 24 hrs. per day or less | # of seats: | _____ | x | 30 | = | _____ |
| Restaurant open 24 hrs. per day | # of seats: | _____ | x | 50 | = | _____ |
| Bar and Cocktail Lounge | # of seats: | _____ | x | 20 | = | _____ |
| Hotels and Motels | # of rooms: | _____ | x | 150 | = | _____ |
| Office Building | building area in square feet: | _____ | x | 0.2 | = | _____ |
| Service Station, self service | # of fuel pumps: | _____ | x | 50 | = | _____ |
| Shopping Center or retail sales | building area in square feet: | _____ | x | 0.10 | = | _____ |
| Theaters and Auditoriums | # of seats: | _____ | x | 5 | = | _____ |
| Warehouse | storage area in square feet | _____ | x | 0.1 | = | _____ |
| Churches | # of sanctuary seats: | _____ | x | 4 | = | _____ |
| add per meal served on a regular basis | # of meals served: | _____ | x | 5 | = | _____ |
| Nursing homes/adult congregate living | # of beds: | _____ | x | 100 | = | _____ |
| add per meal served | # of meals served: | _____ | x | 5 | = | _____ |
| Schools per student | # of students: | _____ | x | 10 | = | _____ |
| add per meal served | # of meals prepared: | _____ | x | 5 | = | _____ |

IMPACT FEE CALCULATION (continued)

Multi-Family Residential:

1 bedroom w/ 750 sq. ft. or less
 2 bedroom w/ 750 - 1200 sq. ft.
 3 bedroom w/ 1201 - 2250 sq. ft.
 4 bedroom w/ 2251 - 3300 sq. ft.

of units: _____ x 100 = _____
 # of units: _____ x 200 = _____
 # of units: _____ x 300 = _____
 # of units: _____ x 400 = _____

Other Uses not listed: _____

_____ x _____ = _____

Total Usage (Gallons per day(gpd)) = 620 (a)**Total Number of Equivalent Residential Units (ERU's): 620 (a) / * 300 gpd = 2.067 (b)****Water Impact Fee: 2.067 (b) x (W) = \$2602.35 (c)****Sewer Impact Fee: 2.067 (b) x (S) = \$5731.79 (d)****Notes:****(W) - Insert Water Fee from Impact Fee Schedule****(S) - Insert Sewer Fee from Impact Fee Schedule**

* An Equivalent Residential Unit is equal to 300 gpd

Total Impact Fee (c) + (d): \$83334.14 (e)**B. METER INSTALLATION / SEWER TAP IN FEE CALCULATION**

5/8" X 3/4" Meters: # of meters: _____ x \$375 = _____

3/4" Meters: # of meters: _____ x \$375 = _____

1" Meters: # of meters: _____ x \$375 = _____

1 1/2" Meters: # of meters: _____ x \$860 = **\$860**

Meters 2" and Larger (by Customer) # of meters: _____ x \$0 = _____

Sewer Tap In (if required less than 4' depth) # of taps (not more than one): _____ x \$975 = _____

Total Meter Installation & Sewer Tap In Fees : \$860 (f)**C. WATER AND SEWER DEPOSIT**

5/8" X 3/4" Meter Water Deposit: \$45.00 _____

Sewer Deposit: \$60.00 _____

3/4" Meter Water Deposit: \$50.00 _____

Sewer Deposit: \$70.00 _____

1" Meter Water Deposit: \$80.00 _____

Sewer Deposit: \$105.00 _____

1 1/2" Meter Water Deposit: \$150.00 _____

Sewer Deposit: \$175.00 _____

2" Meter Water Deposit: \$250.00 **\$250.00**Sewer Deposit: \$280.00 **\$280.00**

3" Meter Water Deposit: \$375.00 _____

Sewer Deposit: \$450.00 _____

4" Meter Water Deposit: \$625.00 _____

Sewer Deposit: \$750.00 _____

6" Meter Water Deposit: \$700.00 _____

Sewer Deposit: \$800.00 _____

Total Water and Sewer Deposit Fees : \$530 (g)**D. TOTAL FEES****TOTAL FEES DUE (e) + (f) + (g): \$9,724.14**

Received by: _____

Date: _____