

GENESEE COUNTY DRAIN COMMISSIONER WATER & WASTE SERVICES



Jeffrey Wright - **DRAIN COMMISSIONER**
 G-4610 BEECHER ROAD - FLINT, MI 48532
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PLEASE COMPLETE ALL
 FIELDS BELOW. AN
INCOMPLETE APPLICATION
WILL NOT BE PROCESSED.

APPLICATION REQUESTING A RESIDENTIAL EQUIVALENT UNIT (REU) AUDIT

CONNECTION ADDRESS: _____

TENANT SPACE: _____ MUNICIPALITY: _____

PROPERTY OWNER: _____ PHONE: _____

PROPERTY OWNER ADDRESS: _____

BUSINESS AND/OR CONNECTION NAME: _____

BUSINESS CONTACT: _____ PHONE: _____

PREVIOUS BUSINESS USE: _____

PROPOSED BUSINESS USE: _____ PID # _____

HOURS OF OPERATION: _____

NUMBER OF EMPLOYEES ON LARGEST SHIFT: _____

TOTAL AREA (Square Footage) OF BUSINESS/TENANT (INCLUDING ALL BASEMENTS AND LEVELS): _____

APPLICANT TO PROVIDE A PROPOSED FLOOR PLAN WITH THE APPLICATION Check Box

Please attach a letter from the local unit of government (LUG) to this application that indicates why the audit is being requested. Wholesale LUG customers shall also provide copies of all b-permits and confirm the total number of REU's purchased with this application.

PLEASE NOTE THAT A SIGNATURE FROM EACH ENTITY BELOW ALONG WITH A REQUEST LETTER FROM THE LOCAL UNIT OF GOVERNMENT AS DETAILED ABOVE IS REQUIRED TO CONDUCT. THE BUSINESS CONTACT IS HOWEVER REQUIRED TO SIGN THE BOTTOM OF THIS FORM ACKNOWLEDGING THE FEE STATEMENT IN THE BOX BELOW.

PROPERTY OWNER SIGNATURE: _____ DATE: _____

BUSINESS CONTACT SIGNATURE: _____ DATE: _____

LOCAL UNIT OF GOVERNMENT (LUG) SIGNATURE: _____ DATE: _____

PLEASE NOTE: By signing this application you are giving The Genesee County Drain Commissioner's Office Division of Water & Waste Services authorization to conduct an REU Audit for the abovementioned property. This request is viewed by our office as an invitation to access your premises and buildings located on the referenced site. Once the Audit has been completed, you will be notified by this office or by your local unit of Government. **THIS AUDIT MAY RESULT IN ADDITIONAL COUNTY CAPITAL IMPROVEMENT FEES (CCIF) DUE TO THIS OFFICE AS WELL AS TAP-IN FEES DUE TO THE LOCAL UNIT OF GOVERNMENT. ANY CCIF DUE SHALL BE PAID PRIOR TO THE LOCAL UNIT OF GOVERNMENT ISSUING A FINAL OCCUPANCY PERMIT. CCIF IS \$1,000.00 PER REU FOR SANITARY AND \$1,000.00 PER REU FOR WATER.**

REV. 1/2018

BUSINESS CONTACT SIGNATURE
 ACKNOWLEDGING STATEMENTS IN BOX ABOVE: _____ DATE: _____