

**GENESEE COUNTY DRAIN COMMISSIONER WATER & WASTE SERVICES**



Jeffrey Wright - **DRAIN COMMISSIONER**  
 G-4610 BEECHER ROAD - FLINT, MI 48532  
 PHONE (810) 732-7870 FAX (810) 732-9773

PLEASE COMPLETE ALL  
 FIELDS BELOW. AN  
 INCOMPLETE APPLICATION  
 WILL NOT BE PROCESSED.

**APPLICATION REQUESTING A RESIDENTIAL EQUIVALENT UNIT (REU) AUDIT**

BUSINESS NAME: \_\_\_\_\_

CONNECTION ADDRESS: \_\_\_\_\_

TENANT SPACE: \_\_\_\_\_ MUNICIPALITY: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPERTY OWNER ADDRESS: \_\_\_\_\_

BUSINESS CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

PROPOSED BUSINESS USE: \_\_\_\_\_ PID # \_\_\_\_\_

PREVIOUS BUSINESS USE: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_

NUMBER OF EMPLOYEES ON LARGEST SHIFT: \_\_\_\_\_

TOTAL AREA OF BUSINESS/TENANT (INCLUDING ALL BASEMENTS AND LEVELS): \_\_\_\_\_

*Please attach a letter from the local unit of government (LUG) to this application that indicates why the audit is being requested. LUG's shall also provide copies of all B-permits and confirm the total number of REUs 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 AUDIT. 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: \_\_\_\_\_

PROPERTY OWNER EMAIL ADDRESS: \_\_\_\_\_

BUSINESS CONTACT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

BUSINESS CONTACT EMAIL ADDRESS: \_\_\_\_\_

LOCAL UNIT OF GOVERNMENT (LUG) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Wholesale LUG: Does the existing sanitary sewer have capacity for this proposed business?  YES  NO

**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 redetermination of 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 ANY PERMITS. CCIF ARE \$1,000.00 PER REU FOR SANITARY AND \$1,000.00 PER REU FOR WATER.**

Floor plan and plumbing plans shall be submitted with application.

BUSINESS CONTACT SIGNATURE  
 ACKNOWLEDGING STATEMENTS IN BOX ABOVE: \_\_\_\_\_ DATE: \_\_\_\_\_