

GREATER CINCINNATI WATER WORKS BUILDING PERMIT REVIEW APPLICATION

AN OVERALL **SITE PLAN** SHOWING PROPOSED WATER MAINS AND WATER SERVICES MUST BE ATTACHED AND SUBMITTED WITH THIS APPLICATION FORM.

ENGINEERING DIVISION

4747 SPRING GROVE AVE.
CINCINNATI, OH 45232-1986
(513)-591-7924

APPLICATION NO. _____

BldgPermit.Review@gcww.cincinnati-oh.gov

BUILDING DEPARTMENT JURISDICTION _____

THIS FORM MUST BE SUBMITTED TO GCWW FOR ANY CONSTRUCTION WORK, EVEN IF WATER SERVICE IS NOT DESIRED OR IF EXISTING WATER SERVICE IS OR IS NOT IMPACTED.

COMMUNITY OR SUBDIVISION NAME _____

| IDENTIFICATION | NAME | ADDRESS, CITY, STATE, ZIP | PHONE NO. |
|--------------------|------|---------------------------|-----------|
| OWNER | | | |
| GENERAL CONTRACTOR | | | |
| PLANS BY | | | |
| SUBMITTED BY | | | |

COUNTY AUDITOR'S BOOK _____ PAGE _____ PARCEL _____ LOT _____

PROJECT ADDRESS _____

TYPE OF BUILDING/LAND USE (CHECK ALL APPROPRIATE ITEMS)

- | | | |
|---|--|---|
| <input type="checkbox"/> RESIDENTIAL, 1-3 FAMILY | <input type="checkbox"/> EDUCATIONAL BUILDING | <input type="checkbox"/> LIGHT INDUSTRIAL |
| <input type="checkbox"/> RESIDENTIAL, MULTIPLE FAMILY | <input type="checkbox"/> INSTITUTIONAL/MEDICAL | <input type="checkbox"/> FACTORY/INDUSTRIAL |
| <input type="checkbox"/> LIGHT BUSINESS/COMMERCIAL | <input type="checkbox"/> ASSEMBLY BUILDING | <input type="checkbox"/> HIGH HAZARD |
| <input type="checkbox"/> HEAVY BUSINESS/COMMERCIAL | <input type="checkbox"/> STORAGE BUILDING | <input type="checkbox"/> GOVERNMENT |
| <input type="checkbox"/> OTHER _____ | | |

CHECK ALL BOXES THAT APPLY:

- APPLICANT WILL USE EXISTING WATER SERVICE (IF KNOWN) ACCOUNT # _____
- APPLICANT WILL REQUEST **NEW DOMESTIC WATER SERVICE** AND MAKE SEPARATE APPLICATION FOR WATER SERVICE AT GCWW BRANCH SERVICE SECTION
- APPLICANT WILL REQUEST **NEW FIRE SERVICE** AND MAKE SEPARATE APPLICATION FOR WATER SERVICE AT GCWW BRANCH SERVICE SECTION
NEEDED FIRE FLOWS FROM PUBLIC WATER SYSTEM _____ (G.P.M.) AT 20 P.S.I., FROM LICENSED FIRE SPRINKLER CONTRACTOR
ACCEPTABLE TO THE LOCAL FIRE AUTHORITY AND GCWW.
- APPLICANT DESIRES **NO WATER SERVICE TAP** FROM GCWW
 USING CISTERN; USING WELL; STRUCTURE NOT FOR HUMAN HABITATION

The undersigned owner of this building or agent of the owner hereby certifies that the information and statements given on the application, drawings and specifications are, to the best of his/her knowledge, correct and acknowledges the action taken on this application does not constitute approval for sizing, metering and/or cross connection control or for other requirements of the GCWW Rules and Regulations.

Owner is reminded to make application for water service at the GCWW Branch Services Counter at the same address as above. GCWW current standards for branch materials will apply.

NAME _____ TITLE _____

COMPANY NAME _____

DATE _____

DAYTIME PHONE NUMBER _____ EMAIL ADDRESS _____

*****FOR GCWW USE ONLY*****

WATER IS AVAILABLE

WATER CAN BE MADE AVAILABLE SUBJECT TO THE FOLLOWING CONDITIONS BEING MET PRIOR TO THE GCWW ACCEPTANCE OF A WATER SERVICE BRANCH APPLICATION

WATER IS NOT AVAILABLE

EXPLANATION: _____

APPLICATION REVIEWED BY _____

TITLE _____

DATE _____