



# CAPACITY ASSURANCE REVIEW APPLICATION (FLOW ACCEPTANCE & WILLINGNESS TO SERVE)

All requests require a utility drawing indicating the proposed water/sewer connection point(s) and sizes.

**1**

**REQUESTED BY**

First Name	Last Name	MI	Company (if applicable)
Address			e-mail
City	State	Zip	Phone

**2**

**PROJECT LOCATION**

Project Name			
Site Address			
City	State	Zip	Tax Parcel Number

**3**

**PROJECT INFO**

**Complete the following:**

<p>1. Project is: <input type="checkbox"/> new; <input type="checkbox"/> modification</p> <p>2. Type of development? (15A NCAC 02T.0114 Wastewater Design Flow Rates)</p> <p>a. Residential, apartment _____ units</p> <p>b. Residential, townhome/condominium _____ units</p> <p>c. Amenity Center (sf) or Pool (people) _____sf/persons</p> <p>d. Residential, single-family _____lots</p> <p>    i. Public Roads? <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>e. Restaurant _____seats</p> <p>f. Retail or Retail with food prep _____sf</p> <p>g. Office _____#emp/shift</p> <p>h. Warehouse _____#loading bays</p> <p>i. Hotel or Suites _____rooms</p> <p>j. School _____students</p> <p>    i. Cafeteria <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>    ii. Gym/Locker rooms <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>k. Other (provide flow calculations) _____</p>	<p>3. Will this project have a pool? <input type="checkbox"/> Y* <input type="checkbox"/> N <i>*if yes, pool must have a 4-inch drain line</i></p> <p>4. Will this project have a private sewer lift station? <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>5. Total wastewater flow requested (average daily flow in <b>gpd</b>, show calculations) _____</p> <p>6. Commercial only: Peak wastewater flow requested (peak hourly flow in <b>GPH</b>) _____</p> <p>7. Average Daily Water Demand: _____</p> <p>8. Peak Water Demand (<b>GPM</b>): _____</p> <p>9. Does this project include a 6-inch or larger private sewer line providing service to multiple buildings? <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>10. Does this project include a 2-inch or larger private water line providing service to multiple buildings? <input type="checkbox"/> Y <input type="checkbox"/> N</p>
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**OFFICE USE ONLY**

CLTWater Tracking #: \_\_\_\_\_ Map #: \_\_\_\_\_

Does the flow transmit through a CLTWater lift station?  Y  N If yes, which station? \_\_\_\_\_

WWTF: McAlpine / McDowell / Irwin / Sugar / Mallard / Rocky River Flow amount (gpd): \_\_\_\_\_

Basin: \_\_\_\_\_

**e-mail this application with utility plan to:**  
**CHARLOTTE WATER**  
 5100 Brookshire Blvd  
 Charlotte, NC 28216  
 e-mail: [newservicerequests@ci.charlotte.nc.us](mailto:newservicerequests@ci.charlotte.nc.us)

