

**SQUAW VALLEY PUBLIC SERVICE DISTRICT**  
**COMMERCIAL PROPERTY INSPECTION**

NAME OF OWNER: \_\_\_\_\_

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

APN # \_\_\_\_\_ DATE: \_\_\_\_\_

	<b>Number of Fixtures</b>	
	<u>Public</u>	<u>Private</u>
Bathtub w/or w/o shower over	_____	_____
Drinking Fountain	_____	_____
Floor Drain	_____	_____
Floor Sink	_____	_____
Laundry Tub/ Mop Sink	_____	_____
Shower	_____	_____
Dishwasher	_____	_____
Sink (Bar)	_____	_____
Sink (Lav.)	_____	_____
Sink (Kitchen) DbL.	_____	_____
Sink (Washup/Pot)	_____	_____
Urinal	_____	_____
Toilet	_____	_____
Washing Machine	_____	_____
Hot Tub	_____	_____
Hose Bibb	_____	_____
Other	_____	_____
<b>TOTAL</b>	_____	_____

Signature of Owner or Agent: \_\_\_\_\_

Signature of District Representative: \_\_\_\_\_

Comments:

**SQUAW VALLEY PUBLIC SERVICE DISTRICT  
COMMERCIAL PLUMBING FIXTURES \* PUBLIC**

NAME OF OWNER: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 APN# \_\_\_\_\_ DATE: \_\_\_\_\_

	Fixture Total	PUBLIC		TOTAL	
		Equivalent Fixture Units Sewer	Water	Equivalent Fixture Units Sewer	Water
Bathtub w/or w/o shower over	_____	2	4	_____	_____
Drinking Fountain	_____	1/2	1/2	_____	_____
Floor Drain(non-emergency)	_____	2	0	_____	_____
Floor Drain(emergency)	_____	0	0	_____	_____
Floor Sink	_____	0	0	_____	_____
Laundry Tub	_____	2	1.5	_____	_____
Mop Sink	_____	3	3	_____	_____
Shower	_____	2	2	_____	_____
Dishwasher	_____	2	1.5	_____	_____
Sink (Bar)	_____	2	2	_____	_____
Sink (Lav.)	_____	1	1	_____	_____
Sink (Kitchen) Dbl. (Commercial)	_____	2	1.5	_____	_____
Sink (Washup/Pot)	_____	2	2	_____	_____
Urinal (Wall)	_____	2	2	_____	_____
Toilet (Flushometer Valve)	_____	4	5	_____	_____
Toilet (Flush Tank)	_____	4	2.5	_____	_____
Washing Machine	_____	3	4	_____	_____
Hot Tub	_____	2	4	_____	_____
3/4" Bathtub Fill Valve	_____	2	10	_____	_____
Hose Bibb	_____	_____	2.5	_____	_____
Each Additional	_____	_____	1	_____	_____
Swimming Pools: Per Code Section 6.10.B	_____	_____	_____	_____	_____
<b>TOTAL</b>	_____	_____	_____	_____	_____

Signature of Owner or Agent: \_\_\_\_\_  
 Initials of District Representative: \_\_\_\_\_

**SQUAW VALLEY PUBLIC SERVICE DISTRICT  
COMMERCIAL PLUMBING FIXTURES \* PRIVATE**

NAME OF OWNER: \_\_\_\_\_

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

APN: \_\_\_\_\_ DATE: \_\_\_\_\_

	<u>Fixture Total</u>	<u>PRIVATE</u> Equivalent Fixture Units <u>Sewer Water</u>	<u>TOTAL</u> Equivalent Fixture Units <u>Sewer Water</u>
Bathtub w/or w/o shower over	_____	<u>2</u> <u>4</u>	_____
Drinking Fountain	_____	<u>1/2</u> <u>1/2</u>	_____
Floor Drain (for emergencies) (non emergency floor drains)	_____	<u>0</u> <u>0</u> <u>2</u> <u>0</u>	_____
Floor Sink	_____	<u>0</u> <u>0</u>	_____
Laundry Tub/ Mop Sink	_____	<u>2</u> <u>1.5</u>	_____
Shower (each head)	_____	<u>2</u> <u>2</u>	_____
Dishwasher	_____	<u>2</u> <u>1.5</u>	_____
Sink (Bar)	_____	<u>1</u> <u>1</u>	_____
Sink (Lav)	_____	<u>1</u> <u>1</u>	_____
Sink (Kitchen) Dbl.	_____	<u>2</u> <u>1.5</u>	_____
Sink (Washup/Pot)	_____	<u>2</u> <u>2</u>	_____
Urinal (Tank)	_____	<u>2</u> <u>2</u>	_____
Toilet (Flush/ Gravity)	_____	<u>3</u> <u>2.5</u>	_____
Washing Machine	_____	<u>3</u> <u>4</u>	_____
Hot Tub	_____	<u>2</u> <u>4</u>	_____
3/4" Bathtub Fill Valve	_____	<u>2</u> <u>10</u>	_____
Hose Bibb (1st)	_____	<u>-</u> <u>2.5</u>	_____
Each Additional	_____	<u>1</u>	_____
Other	_____	_____	_____
<b>TOTAL</b>	_____	_____	_____

Signature of Owner or Agent: \_\_\_\_\_

Signature of District Representative: \_\_\_\_\_

Comments: \_\_\_\_\_