

INLET BEACH WATER SYSTEM, INC.

95 N. Wall Street, Inlet Beach, FL 32461-7258

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CONNECTION FEE FIXTURE VALUE WORKSHEET FOR SINGLE FAMILY RESIDENTIAL AND CONDO UNITS

This form must be filled out completely in order to be processed correctly.

PROPERTY OWNER: _____ CONTRACTOR NAME: _____

PHONE # _____ PARCEL # _____

LOCATION ADDRESS: _____

METER SIZE: _____ EMAIL: _____

FIXTURES	FIXTURE VALUE	QUANTITY	Total Fixture Unit Per ERC (fixture value x quantity)
Bathtub/Shower			
Lavatory/Bathroom sinks			
Toilet(s)			
Bidet			
Urinal			
Kitchen Sink			
Dishwasher			
Washing Machine			
Laundry Sink			
Mop Sink (each set of faucets)			
Service Sink (Wet Bar/Hand Sink)			
Ice Machine			
Drinking Fountain			
RV or Trailer Space			
Ice Maker (in refrigerator)			
Shower (Outside)			
Exterior Hose Connection			
RV or Travel Trailer Space (without sewer)			
(1) ERC = 220 Total Fixture Unit	TOTALS		

Kitchen(s) _____ Bathroom(s) _____ Bedroom(s) _____

	(total fixture unit)	ERC	Impact Fee Per ERC	Estimated Impact Fees <small>(Doesn't include credits or other charges)</small>
WATER	() /	=	X	= _____
SEWER	() /	=	X	= _____

* Minimum ERC is 1. All ERC's are calculated to the nearest .25 over 1 ERC.

OFFICE USE ONLY:

Boring: W _____ S _____

Grinding Pump: _____

Credits: W _____ S _____

Account #: _____

Signing of this form is implying that all fixture counts are true and correct. Failure to list all fixtures will result in penalty under perjury by law. IBWS will report any fraudulent misrepresentation of these fixtures to the Division of Business and Professional Regulations against your contractor's license. This fixture count will be verified based on the permit plans provided and will be field verified during construction. Please allow 10 to 14 days for reviewing and to receive an invoice/quote for impact fees.

RETURN THIS COMPLETED FORM TO IBWS, INC. ALONG WITH A SIGNED, SEALED SET OF BUILDING PLANS

Signature of Applicant _____