PRCTI20220811

CERTIFICATE OF WATER AVAILABILITY

Pd =	
0.	001
CC	4/911
	121/22

PART A TO BE COMPLETED BY APPLICANT							
PROJECT ADDRESS: 3500 MERIDIAN S APPLICATION #:							
SUBDIVISION/PROJECT NAME: MACY'S INTERIOR ALTE	RATIONS PARCEL:	20	94004040				
Proposed Water Usage: (# connections) NO CHANGES P	ROPOSED	_ (ERUs)	N/A				
Customer Type (check one):	Residential	☐ Multi-Fam	nily				
	☐ Industrial						
Project Description (include building s.f., bathrooms, kitche		-					
INTERIOR ALTERATIONS WITHIN AN EXISTING MACY'S RET	AIL STORE. NO MO	DIFICATIONS	PROPOSED TO	EXISTING			
PLUMBING FIXTURES OR PLUMBING SYSTEMS.			•				
Additional Fees may follow:							
The undersigned, my appointed representative, or I have rability to provide the indicated service. I have read and under this Certificate, and acknowledge that the proposed prowould incur my financial obligation. Prior to final approval for a legal contract between myself and the water utility which responsibility, and financial obligation may be required. It is from the date of acceptance by Fruitland Mutual Water Corequired to resubmit their request for water availability.	derstand the informa ject may require im or construction of th specifies the terms s understood water	ation provided provements to e water faciliti of water servi availability is o	by the water po the water syst es, it is undersi ce, operational only held three	urveyor em that tood that years			
PRINT NAME	SIGNATURE (1//					
-		大人	*				
	CINCINNATI	State	OHIO Zip	45202			
Phone: 513.317.4830 Email: aharte@a	rchitecture359.com	Fax:					
(Please ensure that you complete the above PRIOR to a PART B TO BE COMPLETED BY WATER PURVEYOR							
Water system to provide service: Pri Hand	Wester State	ID No.: 2	6800				
The proposed development is ☑ or is not ☐ with	n our approved se	ervice area (c	check one).				
This water utility will 🛮 or will not 🔲 be providing	service (check on	e).					
Approved number of connections: 44//	Existing source ca	apacity (ERU	s): 10 Z	56			
Approved ERUs: 10 994							
Number of current/existing users (ERUs): 66/1	Existing s	torage (ERU	(s): 899	39			
Water service will be provided by:							
Current service line.							
☐ Direct connection to approved, existing water	maln.						
Extension of existing water main(s).							
New water system in accordance with WAC 246-		/		19D.130.			
Are water system facilities approved according to	DOH requirement	s? Ye	5				
Water service will be made available to this project		A					
Staff Recommendation to Board (check one):	Approve		eny				
NOTE: Completion of page 2 and w	ater purveyor sig	gnature are	required.				

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Page 2						
PROJECT ADDRESS;		APPLIC	CATION#:			
SUBDIVISION/PROJECT NAME:						
FIRE FLOW INFORMATION;						
FOR ALL PROJECTS - SINGLE-FAMILY RE	SIDENTIA	L, MULTI-F.	AMILY, C	OMMERCIAL, INDUSTRIAL		
WATER MAINS:						
Location of nearest main capable of supplying at least 500 GPM;						
If not in street at front of property, distance	from prop	erty to abov	e main is	feet.		
Fire Flow available at 20 psi is 400 GPM	1 for 120	minutes.				
Estimated static pressure at project location	on is <u>45</u>	psi.				
HYDRANTS:						
Distance from centerline of property fronta apparatus travel is < 200 feet. Hydrant N	age to near umber:	est hydrant i	measured	along routes of fire		
THE AMOUNT OF AVAILABLE FIRE FLOW INDI NORMAL DOMESTIC MAXIMUM USE.	CATED AB	OVE IS IN A	T NOITIGE	O REQUIREMENTS FOR		
A WATER SYSTEM VICINITY MAP THAT SHOW PROJECT IS REQUIRED FOR ALL PROJECTS.	S THE WAT	TER MAINS A	ND HYDR	ANTS SERVING THIS		
A contract (has) (has not) been signed	with the ap	plicant for w	ater servi	ce, (check one)		
The above information is an accurate account						
FOR PRELIMINARY SHORT PLAT OR SUB We understand that this document, in absence and ability to provide water service. It is furthe comprehensive plan, additional engineering a facilities to provide water service to this project	e of a lega er understo pproval ha	l contract, co od that, in th s been obtai	e absence ned which	e of an approved n demonstrates that		
Water Purveyor:	Date:					
Signature;	Title:			Phone:		
Availability Expiration Date:						
FOR REMODELS/ADDITIONS: We understand that this document, in absence and ability to provide water service. It is further comprehensive plan, additional engineering a facilities to provide water service to this project.	er understo pproval ha	od that, in th s been obtai	e absence ned which	e of an approved demonstrates that		
Water Purveyor:			Date:			
				Phone:		
Availability Expiration Date:						
FOR FINAL SHORT PLAT, SUBDIVISION, BE We the undersigned water purveyor, certify the responsibility for the above water system which accordance with Washington Administrative County Code 17C.60.165 and 19D.130, and a	at we will a ch has bee code 246-2 an approve	assume full on designed, 90, RCW 90 d water syste	perationa approved .44 (Wate em compr	l and maintenance and installed* in r Rights Permits), Pierce ehensive plan.		
Water Purveyor: Frettand le	aver		Date;	19 Apr 22		
Signature: Jan Medica	Title:	Gu		Phone: 253 848 551		
Availability Expiration Date: 19 April	25					

^{*}A Bond or Assignment of Funds (please attach) is acceptable for final land division applications only.

