

# Non-Residential Sewer Use Certification

## Sewage Treatment Capacity Charge



**King County**

Department of Natural Resources and Parks  
Wastewater Treatment Division

To be completed for all new sewer connections, reconstructions or change of use of existing connections.

**Please Print or Type**

Property Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Owner's Name \_\_\_\_\_

Owner's Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Owner's Phone Number including Area Code \_\_\_\_\_

Property Contact Phone Number including Area Code \_\_\_\_\_

Party to be Billed (if different from owner) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**A. Fixture Units**

Fixture Units x Number of Fixtures = Total Fixture Units

Kind of Fixture	Fixture Units		No. of Fixtures		Total Fixture Units
	Public	Private	Public	Private	
Bathtub and Shower	4	4			
Shower, per head	2	2			
Dishwasher	2	2			
Drinking fountain (each head)	1	0.5			
Hose bibb (interior)	2.5	2.5			
Clothes washer or laundry tub	4	2			
Sink, bar or lavatory	2	1			
Sink, Clinic flushing	8	8			
Sink, kitchen	3	2			
Sink, other (service)	3	1.5			
Sink, wash fountain, circle spray	4	3			
Urinal, flush valve, 1 GPF	5	2			
Urinal, flush valve, >1 GPF	6	2			
Water closet, tank or valve, 1.6 GPF	6	3			
Water closet, tank or valve, >1.6 GPF	8	4			
<b>Total Fixture Units</b>					

Residential Customer Equivalent (RCE)  
20 fixture units equal 1.0 RCE

$\frac{\text{Total Fixture Units}}{20} = \text{RCE}$

**For King County Use Only**

Account # \_\_\_\_\_

No. of RCEs \_\_\_\_\_

Monthly Rate \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Property Tax ID #: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot #: \_\_\_\_\_

Subdiv. #: \_\_\_\_\_ Block #: \_\_\_\_\_

Building Name (if applicable): \_\_\_\_\_

City or Sewer District: \_\_\_\_\_

Sewer or Building Permit Final Date: \_\_\_\_\_

Side Sewer or Building Permit Number: \_\_\_\_\_

**Please report any demolitions of pre-existing structures on this property and include a copy of the permit.**

**Credit for a demolition may be given under some circumstances.**

(See King County Code 28.84.050, O.5)

Demolition of pre-existing structure?  Yes  No

Was structure on sanitary sewer?  Yes  No

Was sewer connected before 2/1/90?  Yes  No

Sewer disconnection date: \_\_\_\_\_

Type of structure demolished: \_\_\_\_\_

Address of demolished structure: \_\_\_\_\_

Demolition or capping permit number: \_\_\_\_\_

Are multiple structures replacing the demolished structure?  Yes  No

**B. Other Wastewater Flow**

(in addition to Fixture Units identified in Section A)

Type of Facility/Process: \_\_\_\_\_

Estimated Wastewater Discharge:

\_\_\_\_\_ Gallons/days

Residential Customer Equivalents (RCE):

187 gallons per day equals 1.0 RCE

$\frac{\text{Total Discharge (gal/day)}}{187} = \text{RCE}$

**C. Total Residential Customer Equivalents:**

(add A & B)

A  + B  =  Total RCE

Pursuant to King County Code 28.84.050, all sewer customers who establish a new service which uses metropolitan sewage facilities shall be subject to a capacity charge. The amount of the charge is established annually by the Metropolitan King County Council at a rate per month, per residential customer or residential customer equivalent, for a period of fifteen years. The purpose of the charge is to recover costs of providing sewage treatment capacity for new sewer customers. All future billings can be prepaid at a discounted amount.

Questions regarding the capacity charge or this form should be referred to King County's Wastewater Treatment Division at 206-477-5516.

I understand that the information given is correct. I understand that the capacity charge levied will be based on this information. I understand that any deviation may result in a revised capacity charge.

Signature of Owner/Representative \_\_\_\_\_

Date \_\_\_\_\_

Print Name of Owner/Representative \_\_\_\_\_