

## **Public Works Department Utility Services Questionnaire**

Public Works Department
City of Arlington • 154 W Cox Ave • Arlington, WA 98223 • Phone (360) 403 3526

Вι	usiness Name:				Business Phone:							
	nysical Address:											
	ailing Address:											
	-			Owner's Phone:								
Proposed Business Use: ( ) Restaurant ( ) Commercial					( ) Retail							
pr be	OTE: The Rules and I remises install backflow e installed at any prem e nature of activities o	v pi ise	revention assemb where, in the judg	lies gme	(WAC 246.290.4 ent of the City of A	490). Arling	Backflow previ gton Cross Con	entid nect	on a	ssemblies si		
Cı	ross Connection: Pl		se check all applia ected to the wate		• •							
$\supset$	Air washers	0	Cooling Towers	0	Dye Vats	0	Ice Machine/Make	r	0	Steam Generators	;	
$\supset$	Aquarium	0	Decorative Fountain	0	Fire Sprinkler	0	Laboratory Equ	uip.	0	Swimming	Pools	
$\supset$	Autoclave/Sterilizers	0	Degreasers	0	Fume Hoods	$\circ$	Lawn Irrigation	l	$\circ$	Well on pro	perty	
$\circ$	Carbonated Bev.	0	Dental Equip.	0	Hot Tub/Spa	0	Pressure Washers		0	X-ray Mach	ine	
0	Coffee Urn/ Espresso Mach.	0	Dialysis Equip.	0	Hydrotherapy Equip.	0	Chrinkler					
	Other:											
	Stormwater / Waster	wat	er Utility Service	s:								
1.	Does the plumbing s oil/water separator?	yst	em currently have	aç	grease intercepto	or or	0	Yes	<b>;</b>	○ N	0	
2.	Date grease trap/inte	erce	eptor/separator wa	as la	ast cleaned (prov	/ide s	service record):					
3.	Is water used in the		Yes	;	$\circ$ N	0						
4.	Does your business NPDES permit?		Yes	;	$\circ$ N	0						
5.	Does the property's	$\circ$	Yes	;	$\circ$ N	0						
6.	Are there any active wells on the property?   Yes								$\circ$ N	0		
7.	Do you have a Storn	Do you have a Stormwater Control Plan?   Yes   N								0		
8.	Does your business	req	uire an industrial	Sto	rmwater permit?		0	Yes	;	$\circ$ N	0	
	a If yee liet	na	rmit #·				$\circ$	Vac		$\bigcirc$ N	0	

	Does your business have a Spill/Hazard Response Plan in pla		Yes	○ No						
	Will your business produce waste that requires special handlir (i.e., used oil, grease, sawdust shavings, cements slurry, etc.)	ng?	Yes	○ No						
	If yes, please list:									
I do hereby certify that I have familiarized myself with the rules and regulations with respect to preparing and filling out this application and that the statements and information submitted herewith are all in respects true and correct to the best of my knowledge and belief.										
	Print Name:	Date:								
	Signature:	Title/Position:								