

SOOS CREEK WATER AND SEWER DISTRICT

Multi-Family/Commercial/Industrial/Fire/Irrigation/Construction/Water Usage Questionnaire

PLEASE RETURN THIS COMPLETED FORM TO: Soos Creek Water & Sewer District  
 P O Box 58039  
 14616 SE 192<sup>nd</sup> St  
 Renton WA 98058-1039

Today's Date \_\_\_\_\_ Tap Application number \_\_\_\_\_

Project Name \_\_\_\_\_ Lot # \_\_\_\_\_

Business Name \_\_\_\_\_

Business Type \_\_\_\_\_

Physical Property Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Property Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

(1) Please indicate if your facility has, or will have, any of the following: **Please answer each item**

**If your residential fire sprinkler system is a FLOW – THROUGH SYSTEM 13 OR 13D...STOP HERE!**

Yes  No

	Yes	No		Yes	No
Air conditioning system	___	___	Chemical feed tank for industrial process	___	___
Air Washer	___	___	Chemical feed ( <i>commercial cleaners</i> )	___	___
Aquarium make-up water	___	___	Chlorinators	___	___
Aspirator, chemical	___	___	Computer cooling lines	___	___
( <i>Herbicide, pesticide, weedicide</i> )	___	___	Condensate tanks	___	___
Aspirator, Medical / Lab	___	___	Cooling towers	___	___
Autoclave	___	___	Decorative ponds	___	___
Autopsy Table	___	___	Degreasing equipment	___	___
Auxiliary Water System	___	___	Dental equipment / cuspidors	___	___
( <i>Well, pond, creek, other</i> )	___	___	Dialysis equipment	___	___
Baptismal fountain	___	___	Dye vats and tanks	___	___
Bathtub, below rim filler	___	___	Etching tanks	___	___
Bedpan washer	___	___	Fermenting tanks	___	___
Beverage dispenser ( <i>post-mix Co2</i> )	___	___	Fertilizer injection	___	___
Boiler feed lines	___	___	Film processors	___	___
Bottle washing equipment	___	___	Fire Department pumper connections	___	___

