



G.C.S.D. Services - 209 / 962-7161
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water • fire protection • parks • wastewater collection & treatment

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APPLICATION & WORKSHEET FOR SPECIAL FLAT RATE – SEWER USE

Sewer Ordinance 1-10 Article VII. Service Charges

Section 7.01 (e) Special Flat Rate for Significant Landscape Irrigation

In order to qualify for the special flat rate determined under the provisions of this paragraph, Users shall provide proof suitable to the District's General Manager of said irrigation, in which the General Manager shall determine is significant relative to the User's total water usage.

Name: _____ Phone Number: _____

Service Address _____ Unit/Lot: _____

Mailing Address: (if different): _____

State: _____ Zip: _____

Full Time Resident

Weekend/Part Time

Type of Irrigation System: Drip

Sprinklers

Combined

Timer System Yes No

Number of Sprinklers: _____

Onsite Inspection

Photograph of Landscape

**** Proof of Irrigation can be validated by an onsite inspection by GCSD staff or by full colored photographic evidence of the landscape and irrigation systems ****

X Signature: _____

Date: _____

By signing this application you are validating that the above is a truthful representation of winter water use. If for any reason the enclosed information is invalid, sewer charges will revert to standard billing charges of \$.00698 per gallon.

****Sewer customers must re-apply annually to be considered for Winter Averaging.****

To be Completed By GCSD Staff

January _____

Summer Volume Use:

June: _____

February _____

July: _____

March _____

Aug: _____

Average Monthly Use: _____

General Manager Approval: _____

Field Notes: _____

Amount of Adjustment to UB Account: < >

Letter of Approval/Denial Mailed: _____