Garfield Bay Water & Sewer District # 82
COMMERCIAL ENTERPRISE SEWER SERVICE REPORT

Name of Business:____

Billing Address: ____

BUSINESS ACTIVITIES (Check those that apply)

______ Bar/Restaurant (Complete Item 9)
______ Restaurant Complete Item 9)
______ Marina (Complete Items 2, 3, 4, & 8)
______ Retail store or auto gas station (Complete Item 1,9 &12)
______ Recreational Vehicle Park (Complete Items 2, 3, 4,5,6,7,8,10 &11)
______ Cabin Rental (Complete Items 7 & 10)
______ Laundry (Complete Item 4)
______ Other (Please specify) ____ (Complete all Items shown below.)

FACILITIES: (Used by public, clientele or employees)

Item:

1. Number of restrooms: _____
2. Number of toilets and urinals (combined): _____
3. Number of shower stalls: _____
4. Number of washing machines: _____
5. Number of RV spaces with sewer connection: _____
6. Number of RV or camping spaces w/o sewer connection: _____
7. Number of rental cabins or rental units: _____
8. Number of RV or boat dumping stations owned by the business: _____
9. Number of chairs or barstools available for customer use: _____
10. Number of rental cabins or units occupied or expected to be occupied for 150 days or more in a calendar year: _____
11. Number of individual recreational vehicles occupying or expected to occupy a sewer connected RV space for 150 days or more in a calendar year: _____
12. Number of employees. _____

Signature of the Person Recording Information: ____

Date of Completion: ____________________

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FOR OFFICE USE ONLY

Authorized Service: ______________________________Serving Being Used: ____________________

Final