KITSAP PUBLIC HEALTH DISTRICT

345 6th Street, Suite 300
Bremerton, WA 98337
360-728-2235

# Drinking Water Project/Design Submittal Cover Sheet

Group B Public Water Systems

| Submittal Date | Memo Number | Review Fee |
|---|---|---|
| | | |

## WATER SYSTEM INFORMATION

*Group B Name & ID Number (or Proposed System/No ID)*

*Assessor's Account Number of Well Location*

*Purveyor Name and Phone*

*Purveyor Mailing Address*

*Mail City* *State* *Zip/Postal*

*Purveyor Email Address*

## APPLICANT INFORMATION

*Name* *Contact Phone*

*Mailing Street Address*

*Mail City* *State* *Zip/Postal*

*Email Address*

*Relationship to water system (IE existing connection, proposed connection, agent, etc.)*

## APPLICATION TYPE – LICENSED PROFESSIONAL ENGINEER REQUIRED

☐ **Group B Project – Review of alterations for an existing, approved Group B system design-$580**

☐ **Group B Design – Review of a New/Expanding/Existing unapproved system design- $1,030**

☐ **Group B Project – Review of a Completion of Construction (COC) for final approval (no fee required)**

**Fees for original design / project submittal include COC review and final inspection fee*

## PROJECT SUMMARY/DESCRIPTION