

COMMERCIAL SEWER APPEAL FORM



Fallbrook Public Utility District
990 E. Mission Rd
Fallbrook CA, 92028
(760) 728-1125

Name of Business: _____
Owners Name: _____
Site Address: _____
Mailing Address: _____
(if different) _____ Phone: _____
Account No. _____ Cell: _____
Email: _____

As the business owner, I am requesting a review of my sewer billing based on my indications (check one or more) and comments below.

%RTS Appeal: The % "Returned To Sewer" by default is 90% of the water consumption for each month. My business has significant water being used on site that is not "going down the drain" (aka. non-RTS). I will provide detailed information regarding this non-RTS water. The information will be detailed and quantifiable.

I have landscape irrigation that is a form of non-RTS water. *Please, attach description and sketch of the property showing the location of irrigated landscape with dimensions.* The area of the irrigated landscape is _____ square feet. (FPUD Check by GIS: _____)

I have other water uses that do not end up in the sewer and should be considered. I have provided details in the comments below. (Volumetric and quantifiable)

Sewer Strength Appeal: Current strength: L M H . This is a request for sewer strength testing. I have been informed that the sewer outflow will be tested to determine the total BOD and SS for the property indicated above. If the sewer strength measured is lower than the current rate, my future bills will be adjusted. If the sewer strength measured results in no change then I will be subject to a charge for the testing, which is estimated to be about \$ _____

Comments: _____

SIGNATURE: _____ DATE: _____

FPUD REVIEWER: _____ DATE: _____

%RTS re-classification: _____ Sewer Strength re-classification: _____

COMMENTS: _____

Customer notified by: phone email letter Date: _____