



Calendar Year 2020

City of Westminster

56 West Main Street  
Westminster, MD 21157

410.848.9000

Application Fee: \$250.00  
Payable to City of Westminster

For Office Use Only

Case #: WSA-20- \_\_\_\_\_  
Form Received: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_  
DCPD Decision: \_\_\_\_\_  
Appeal Received: \_\_\_\_\_  
Appeal Decision: \_\_\_\_\_

**Water and Sewer Allocation Application**

**Property Owner**

**Property**

Name \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

Occupant \_\_\_\_\_  
Location Address \_\_\_\_\_  
Business Name \_\_\_\_\_  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_  
*Liber* \_\_\_\_\_ *Folio* \_\_\_\_\_

Please indicate all that apply

Water Allocations Type
<input type="checkbox"/> Annexations
<input type="checkbox"/> Commercial and Industrial
<input type="checkbox"/> Good Cause Waivers
<input type="checkbox"/> Residential, Single-family ONLY
<input type="checkbox"/> Residential, Multi-family ONLY
<input type="checkbox"/> Existing Obligations, Public Projects, and Not-for-Profit
<input type="checkbox"/> Health Department Emergency [attach letter from Health Dept]

Sewer Allocations Type
<input type="checkbox"/> Combined with Water
<input type="checkbox"/> Current Allocations on MDE running count
<input type="checkbox"/> Sewer-only for new Annexations
<input type="checkbox"/> Sewer-only for new Good Cause Waivers
Health Department <input type="checkbox"/> Emergency [attach letter from Health Dept]

Submittals and Supporting Documentation
<input type="checkbox"/> Three-year water history for the property
<input type="checkbox"/> Three-year water history for similar use(s)
<input type="checkbox"/> Documentation supporting last known use
<input type="checkbox"/> Fixture counts and flow rates for new use(s)
<input type="checkbox"/> Fixture counts and flow rates for all existing
<input type="checkbox"/> Previous application(s) for same proposal submitted in prior year(s) and declined
<input type="checkbox"/> Other:

SELF-CALCULATION WORKSHEET				
Type of Use	# Units or Area	MDE Rate Factor	New(+) / Demo(-)	Total (gallons per day)
New Residential (in units)		235 gallons per day/unit		
Senior Residential (in units)		125 gallons per day/unit		
Commercial (in sq ft or other)		attached documentation		

Notary area

\_\_\_\_\_  
Property Owner(s) Signature(s) Date

\_\_\_\_\_  
Printed Name(s)

Original, notarized signature(s) of the property owner(s) required for submission of allocation application.

AREA BELOW IS FOR USE BY CITY OF WESTMINSTER

TENTATIVE \_\_\_\_\_ GPD     FINAL \_\_\_\_\_ GPD     DENIED     EXEMPT FROM ALLOCATION

Attest by: \_\_\_\_\_  
 See Attached Date