

UTILITY ALTERATION/CONNECTION PERMIT APPLICATION

UEM Tracking # : _____

SECTION I – GENERAL INFORMATION

- 1) Requester: _____
- 2) Point of Contact: _____ Phone Number: _____
- 3) Project Location: _____
- 4) Type of Work (Check all that apply):
- | | | |
|--|--|--|
| ☐ New Construction | ☐ Building Addition | ☐ Renovation |
| ☐ Demolition/Utility Disconnect | ☐ Repair | ☐ Utility Upgrade |
- 5) Work will include the following utilities (Check all that apply):
- | | | |
|---|---|--|
| ☐ Water - Section II | ☐ Sanitary Sewer – Section III | ☐ Electric – Section IV |
|---|---|--|
- a) Will the alteration and/or connection be permanent or temporary?
- | | |
|------------------------------------|--|
| ☐ Permanent | ☐ Temporary (proceed to question 6) |
|------------------------------------|--|
- b) If permanent connection(s) required and this project involves construction, contact NAVFAC PWD PC Environmental Business Line (Code EV) to determine if local, state for federal environmental permitting is required before proceeding?
- 6) Work to be performed by:
- | | |
|--|---|
| ☐ FEAD Contract | ☐ Facility Sustainment Maintenance Department |
| ☐ BOS Contract | ☐ Utilities and Energy Management Product Line |
| ☐ Other: _____ | |
- 7) Contractual Information:
- Contract Title: _____
- Contract / Job Order / MAXIMO No.: _____ Drawing No: _____
- | | | | |
|-------------------------------------|-------------------------------------|--|---------------------------------------|
| ☐ NAVFAC IPT | ☐ NAVFAC PWD | ☐ Design Activity | ☐ Other: _____ |
|-------------------------------------|-------------------------------------|--|---------------------------------------|

NOTE: Submit a complete set of drawings with the application. Include specifications and design calculations.

Specifications Included: ☐ YES ☐ NO (complete section 7a)

Design Calculations Included: ☐ YES ☐ NO (complete section 7a)

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a) Justification / Reason

8) Design Information:

Firm/Activity: _____

Name: _____ Title: _____

Email: _____ Phone: _____

a) Section II, Part A & B: Qualifications of Designer:

☐ Profession Engineer: License number _____ State _____

☐ Contractor: License number _____ State _____

b) Section II, Part C: Qualifications of Designer:

☐ Profession Engineer: License number _____ State _____

☐ Contractor: License number _____ State _____

c) Section III: Qualifications of Designer:

☐ Profession Engineer: License number _____ State _____

☐ Contractor: License number _____ State _____

d) Section IV: Qualifications of Designer:

☐ Profession Engineer: License number _____ State _____

☐ Contractor: License number _____ State _____

9) Submitted by:

Name: _____ Title: _____

Email: _____ Phone: _____

Signature: _____ Request Date: _____

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10) Reviewed by:

Name: _____ Title: _____ Date: _____

☐ APPROVED ☐ DISAPPROVED

11) Conditions for approval or reason for disapproval:

Not meeting the conditions contained in Section 11 and/or substantial deviation(s) may result in rejection of the utility alteration or service connection and require removal and replacement of constructed system(s) not in compliance at no cost to the government.

- Substantial deviations are defined as deviations greater than 10% from the approved permit application and accompanied plans, specifications and sketches/exhibits.

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SECTION II – WATER

Part A – Potable / Irrigation Water Service(s)

Complete the following for all domestic or irrigation water service connections to Utilities Energy Management Product Line owned water distribution system lines.

- 1) Number of domestic or irrigation water service connection(s):
 - a) Existing service connections abandoned/removed from the water system _____
 - b) New service connections installed to the water system _____
- 2) List the following information for all new domestic or irrigation water service connections (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) Testing Method(s) _____
 - c) Pipe Size(s) _____
 - d) Pipe Material(s) _____
 - e) Pipe Class / Schedule _____
 - f) Required Capacity (gpm) _____
 - g) Required Pressure (psi) _____
 - h) Meter Size(s) _____
 - i) Meter Type(s) _____
 - j) Backflow Preventer Device
☐ Yes ☐ No: (explain) _____

- 3) Description of Work and/or Additional Information:

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Part C – Fire Protection (High Pressure / Non-Potable)

Complete the following for all fire protection main and/or service connections to Utilities Energy Management Product Line owned water distribution system lines.

- 1) Number of fire protection main / service connection(s):
 - a) Existing main / service connections removed from the water system _____
 - b) New main / service connections installed to the water system _____
- 2) List the following information for all new fire protection main and/or service connections (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) Testing Method(s) _____
 - c) Pipe Size(s) _____
 - d) Pipe Material(s) _____
 - e) Pipe Class / Schedule _____
 - f) Required Capacity (gpm) _____
 - g) Required Pressure (psi) _____
 - h) Meter Size(s) _____
 - i) Meter Type(s) _____
 - j) Backflow Preventer Device
☐ Yes ☐ No: (explain) _____
- 3) Description of Work and/or Additional Information:

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SECTION III – SANITARY SEWER

Part A – Sanitary Sewer Lateral(s)

Complete the following for all sanitary sewer lateral connections to Utilities Energy Management Product Line owned sanitary sewer system.

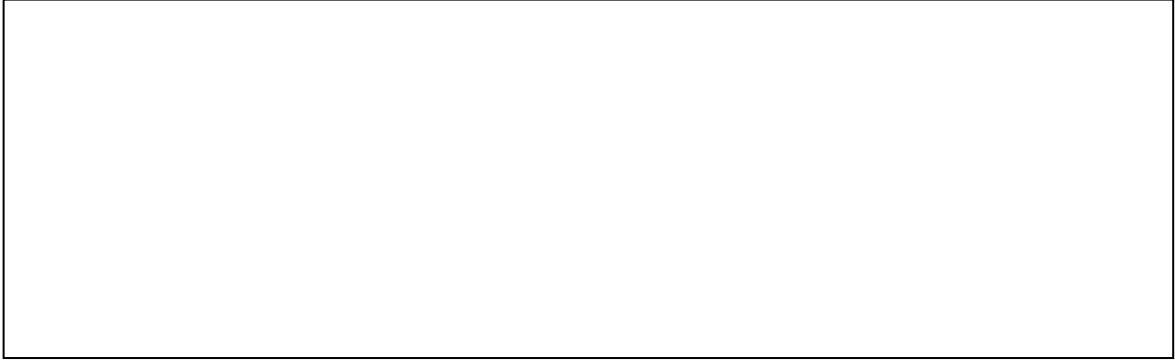
- 1) Number of sanitary sewer lateral connection(s):
 - a) Existing laterals removed from the sanitary sewer system _____
 - b) New laterals removed from the sanitary sewer system _____
- 2) List the following information for all new sewer lateral connections (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) Pipe Size(s) _____
 - c) Pipe Material(s) _____
 - d) Pipe Class / Schedule _____
 - e) Design Capacity (gpm) _____
- 3) Type of discharge from new sanitary sewer laterals:
 - a) Facility Usage Type (Check all that apply):

☐ Office	☐ Residential Housing	☐ Recreational
☐ Warehouse	☐ Food Service	☐ Fuel Depot
☐ Commercial	☐ Barracks	☐ Training Complex
☐ Medical	☐ Industrial	☐ Aircraft Hangar
☐ Other (specify) _____		
 - b) Indicate below any operation occurring in the above facility type (Check all that apply, if none of these apply check N/A)

☐ Food Preparation Operations	☐ Grease Traps
☐ Photo Processing or X-Ray Operations	☐ Laboratory or Clinic
☐ Industrial Laundry or Dry Cleaning	☐ Fabrication and Paint
☐ Handling or Collection of Oils, Solvents, Degreasers or Hazardous Waste	
☐ N/A	
☐ Other (specify) _____	

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4) Description of Work and/or Additional Information:



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Part B – Sanitary Sewer Main(s)

Complete the following for all additions and/or alterations to Utilities Energy Management Product Line owned sanitary sewer main lines.

1) Linear feet of sanitary sewer main:

- a) Existing sewer main(s) abandoned/removed in the proposed work _____
- b) New water main(s) constructed in the proposed work _____

2) Number of sanitary sewer manholes:

- a) Existing sewer manhole(s) abandoned/removed in the proposed work _____
- b) New sewer manhole(s) constructed in the proposed work _____

3) List the following information for all new sewer mains (see instructions for clarification):

- a) Type / Method of Connection(s) _____
- b) Testing Method(s) _____
- c) Pipe Size(s) _____
- d) Pipe Material(s) _____
- e) Pipe Class / Schedule _____
- f) Design / Required Capacity (gpm) _____

4) Description of Work and/or Additional Information:

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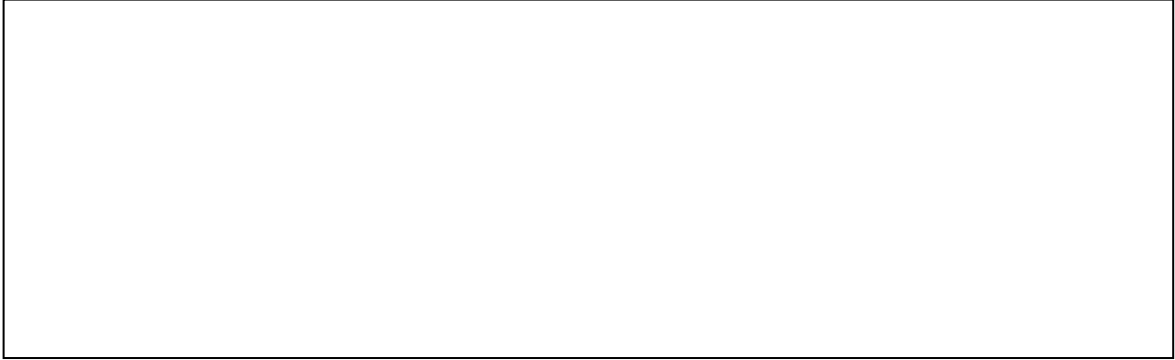
Part C – Sanitary Sewer Pump Station (s) and/or Force Main(s)

Complete the following for all additions and/or alterations to Utilities Energy Management Product Line owned sanitary sewer system with regards to pump stations and force main connections.

- 1) Number of sanitary sewer pump station(s):
 - a) Existing pump stations(s) abandoned/removed in the proposed work _____
 - b) New pump stations(s) constructed in the proposed work _____
- 2) Linear feet of sanitary sewer force main:
 - a) Existing force main(s) abandoned/removed in the proposed work _____
 - b) New force main(s) constructed in the proposed work _____
- 3) List the following information for all pump stations (see instructions for clarification):
 - a) Number of pumps at each station _____
 - b) Pump Size(s) _____
 - c) Design Flow Max. (gpd) _____
 - d) Design Flow Min. (gpd) _____
 - e) Design Flow Avg. (gpm) _____
 - f) Operating Conditions [gpm @ ft (TDH)] _____
 - g) Wet Well Material _____
 - h) Wet Well Dimensions (Diameter / Depth) _____
 - i) Emergency Pump-Out Connection _____
☐ Yes ☐ No: (explain) _____
- 4) List the following information for all force main connections (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) Testing Method(s) _____
 - c) Pipe Size(s) _____
 - d) Pipe Material(s) _____
 - e) Pipe Class / Schedule _____

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5) Description of Work and/or Additional Information:



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SECTION IV – ELECTRIC

Part A – Secondary Electric

Complete the following for all electric service connections to Utilities Energy Management Product Line owned electrical system.

- 1) Number of secondary electric connection(s):
 - a) Existing secondary connections removed from the electric system _____
 - b) New secondary connections installed to the electric system _____
- 2) List the following information for all new domestic water service connections (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) Voltage _____
 - c) Wire Type and Conductor Gauge _____
 - d) Type Meter _____
 - e) Load Study:
☐ Yes ☐ No: (estimated submission date) _____
- 3) Description of Work and/or Additional Information:

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Part B – Primary Electric

Complete the following for all additions and/or alterations to Utilities Energy Management Product Line owned primary high voltage electrical system.

- 1) Number of electrical assets:
 - a) Existing poles abandoned/removed in the proposed work _____
 - b) New poles installed in the proposed work _____
 - c) Existing transformers abandoned/removed in the proposed work _____
 - d) New transformers installed in the proposed work _____
- 2) List the following information for all new primary electric (see instructions for clarification):
 - a) Type / Method of Connection(s) _____
 - b) System Voltage _____
 - c) Design Load _____
 - d) Wire Type, Gauge and Phase(s) _____
 - e) Connection Appurtenance(s) _____
- 3) List the following information for fused connections (see instructions for clarification):
 - a) Type _____
 - b) Material _____
 - c) Voltage Rating _____
 - d) Continuous / Interrupting Current _____
 - e) Voltage Insulation Strength _____
 - f) Fuse Coordination Analysis:
☐ Yes ☐ No: (estimated submission date) _____
- 4) List the following information for new transformer (see instructions for clarification):
 - a) Type _____
 - b) Size / Rating _____
 - c) Voltage and Configuration _____
 - d) Phase(s) _____

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4) Description of Work and/or Additional Information:

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Part C – Generators

Complete the following for all back-up power generator additions and/or alterations.

- 1) Number of electrical assets:
 - a) Existing generators abandoned/removed in the proposed work _____
 - b) New generators installed in the proposed work _____
- 2) List the following information for all new primary electric (see instructions for clarification):
 - a) Size / Rating _____
 - b) Voltage _____
 - c) Design / Required Load _____
 - d) Switch Type:
☐ Automatic ☐ Manual