GRAYWATER COMPLIANCE FORM

Your project may require the installation of a graywater system IF:

● You need a new water meter installed.
● You need to enlarge an existing water meter.

Please complete this form and submit it along with your water service application package.

Property Information

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<th>Address</th>
<th>APN</th>
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Type of Project

☐ New Construction - Development of a property not currently served by MMWD or an addition requiring the installation/enlargement of water service.
☐ Demo & Rebuild - Demolition of existing structures and construction of a new residential or commercial building requiring the installation/enlargement of water service.
☐ Redevelopment - Construction associated with changing the existing use of a property and requiring the installation/enlargement of water service.
☐ Significant Remodel - Changes to an existing structure requiring the installation/enlargement of water service (often due to additional water demands).

Property Owner Acknowledgement

I, _______________________________, the owner or authorized owner’s agent of the above-referenced property, understand that the installation of a graywater system may be required pursuant to MMWD District Code. The viability for installation of a graywater system for this property has been considered and determined that installation of a graywater system is:

☐ Feasible - A graywater system will be installed in compliance with Chapter 16 of the California Plumbing Code. Inspection and approval by the local building department may be required.
Type of Graywater System:

☐ Laundry to Landscape (L2L) - Utilizing clothes washer discharge water for landscape irrigation.
☐ Simple System - A system with a discharge of 250 gallons per day or less. Installation of a district-approved backflow assembly is required.
☐ Complex System - A system with a discharge greater than 250 gallons. Installation of a district-approved backflow assembly is required.

☐ Not-Feasible - A graywater system will not be installed. I have attached a statement of facts to substantiate our determination.

Signature: ___________________________________________ Date: ________________________________