

Mammoth Community Water District

Remodel/Addition Application

Green Code Upgrade



Date:

APPLICANT

Full Name:

Address:

City:

State:

Zip:

Phone Number:

Email:

I authorize my contractor to serve as my agent for matters pertaining to this permit.

PROPERTY

Type of Construction:

Subdivision:

Lot #:

Street Address:

Assessor Parcel # (APN):

[Link to Mono County Parcel Viewer](#)

OWNER

Full Name:

Address:

City:

State:

Zip:

Phone Number:

Email:

CONTRACTOR

Full Name:

Phone Number:

Email:

Contractor License #:

Additional Contact & Info:

Signature on the application acknowledges that if a fixture unit count is misrepresented and upon final inspection it is found that the count is not accurate, replacement of the meter and street lateral may be required at the owner's expense. Payment of additional connection fees may also be required. Removal of fixtures once installed may require Town of Mammoth Lakes approval. The owner assures that the plans submitted in regard to water and sewer improvements are copies of the same plans submitted to the Town of Mammoth Lakes building department.

SIGNATURE OF OWNER:

Date:

Fixture Unit Calculations for Green Code Compliance



If a fixture exists that is not listed contact MCWD for a fixture unit value.

FIXTURE	QUANTITY OF EXISTING FIXTURES	QUANTITY OF NEW FIXTURES TO BE ADDED	TOTAL COLUMN A and B	WATER FIXTURE UNIT VALUE	TOTAL FIXTURE UNITS
Mandatory fixture upgrades for green code compliance					
SEPARATE SHOWER STALL, PER HEAD				X	
<i>IF MULTIPLE SHOWER HEADS OR BODY SPRAYERS EXIST IN ONE SHOWER STALL, EACH HEAD COUNTS AS 1.6 FIXTURE UNITS EACH AND SHOULD BE LISTED.</i>					
BATH/SHOWER COMBO				X	
<i>ONE SHOWER HEAD IS ASSUMED WITH A TUB/SHOWER COMBINATION, ANY ADDITIONAL SHOWER HEADS OR BODY SPRAYERS ARE COUNTED AS 1.6 FIXTURE UNITS EACH AND SHOULD BE LISTED.</i>					
WATER CLOSET (TOILET)				X	
<i>MAXIMUM FLOW RATE ALLOWED IS 1.28 GALLONS PER FLUSH. URINALS FOR RESIDENTIAL USE MUST MEET GREEN CODE STANDARDS. FLUSHOMETER TOILETS AND URINALS REQUIRE SEPARATE CALCULATIONS AND REPRESENT MUCH HIGHER FIXTURE UNIT COUNTS.</i>					
Voluntary fixture upgrades for green code compliance					
LAVATORY (BATHROOM SINK)				X	
<i>MAXIMUM FLOW RATE ALLOWED IS 1.28 GALLONS PER FLUSH. URINALS FOR RESIDENTIAL USE MUST ALSO MEET GREEN CODE STANDARDS.</i>					
KITCHEN SINK				X	
<i>MAXIMUM FLOW RATE ALLOWED IS 1.28 GALLONS PER FLUSH. URINALS FOR RESIDENTIAL USE MUST ALSO MEET GREEN CODE STANDARDS.</i>					
Fixtures not applicable for green code upgrade					
BATHTUBS				X	
BAR SINKS				X	
FIRST HOSE BIBB				X	
ADDITIONAL HOSE BIBBS				X	
CLOTHES WASHER				X	
DISHWASHER				X	
BIDET				X	
MOP BASIN (LAUNDRY SINK)				X	
*COMMERCIAL BAR SINK				X	
*COMMERCIAL SERVICE SINK				X	
TOTAL ENDING FIXTURE UNITS AFTER CONSTRUCTION					

*COMMERCIAL FIXTURE UNIT NUMBERS APPLY TO PUBLIC OR COMMERCIAL USE

IF FIXTURE UNIT COUNT IS 39 OR UNDER A 3/4" METER MAY BE USED.

IF FIXTURE UNIT COUNT IS OVER 39 AND NOT OVER 85 A 1" METER MAY BE USED.

IF FIXTURE UNIT COUNT IS OVER 85 AND NOT OVER 370 A 1-1/2" METER MAY BE USED.

IF FIXTURE UNIT COUNT IS OVER 370 AND NOT OVER 654 A 2" METER MAY BE USED.

Cross Connection Control Questionnaire



In compliance with the Federal Safe Drinking Water Act of 1974, the California Administrative code and Mammoth Community Water District Ordinances #03-19-87-07, it is necessary to ask certain questions regarding the development of your property to determine compliance with our Cross Connection Control Program.

Our cross-connection control program is designed to meet these regulations to protect the public water from backflow of any pollution or contamination.

Date:

PROPERTY

Address:	
Type of Facility:	
What is the building height:	

WHAT TYPE OF USES AND CONNECTIONS OF EQUIPMENT TO THE WATER SUPPLY WILL THERE BE? (Check all that apply to your property)

Boiler System		Hydronics		Irrigation	
Fire Sprinklers		Swamp Cooler		Air Conditioning	
Steam Connected Facility		Heat Exchange System		Spa	
Solar Heat Exchange		Sewage Sump Pump		Gray Water System	
Additional Water Source		Corrosive Inhibitor Unit		Water Softener	
Pressurized Water Tank		What type?		None of the Above	

COMMERCIAL FACILITY: (If you indicated that you are a commercial facility, please check all commercial/industrial equipment utilized.)

Aspirators		Water Cooled Equip.		Booster Pumps	
Film Processing Equip.		Chemical Injection Systems		Circulating Systems	
Non Water Piping		Beverage Machine		Ice Maker	
Coffee Machine		Latte Machine		Garbage Disposal	
Industrial Dishwasher		Cooling Tower		Autoclaves	
Sewage Pumps		Industrial Fluid Lines		Heat Exchanger	
Reclaimed Water System		None of the Above		Other	

Cross Connection Control Questionnaire



FIRE SPRINKLER SYSTEM (If you indicated that you have a fire sprinkler system please select your answer to the following questions.) What type of system will it be?

Air	
Water	
Freeze protection with an antifreeze chemical of some type	
Will this system be supplemented by any auxiliary source?	
Will there be a fire department connection on the project?	

SPA (If you indicated that you have a spa please select your answer to the following questions.)

Plumbed into the water supply and sewer system	
Self-Contained - (Above ground spa)	

HYDRONIC, BOILER OR HEAT EXCHANGE UNITS (If you indicated that a boiler, hydronic of some type of heat exchange system is to be used, please select your answer to the following questions.)

Will Glycol be used in any part of the unit?				
Does the system call for a Backflow Preventer?				
If yes, what type of Backflow Preventer?				
Heat Exchange System will be used to heat	<table border="1"> <tr> <td>Air</td> <td>Water</td> </tr> </table>	Air	Water	
Air	Water			
System will be used for	<table border="1"> <tr> <td>Driveways</td> <td>Walkways</td> <td>House</td> </tr> </table>	Driveways	Walkways	House
Driveways	Walkways	House		

By typing in my name, I acknowledge signing this application.

SIGNATURE OF OWNER/AGENT: _____ DATE: _____

For Office Use Only:

Date: _____ Permit No. _____ Plan Checker: _____
 Subdivision: _____ Lot or Unit #: _____
 Site Address: _____

It has been determined that Backflow Requirements for this property are as follows:



2022 CALGREEN RESIDENTIAL MANDATORY MEASURES EFFECTIVE JANUARY 1, 2023

HCD SHL 615 (New 01/23)

See specific referenced sections for complete details on CALGreen mandatory requirements.

2022 CALGREEN CODE

SECTION	REQUIREMENTS
Division 4.3 – WATER EFFICIENCY AND CONSERVATION	
	Water conserving plumbing fixtures and fittings
4.303.1	<p>Plumbing fixtures and fittings shall comply with the following:</p> <ul style="list-style-type: none"> 4.303.1.1 – Water closets: ≤ 1.28 gal/flush. 4.303.1.2 – Wall mounted urinals: ≤ 0.125 gal/flush; all other urinals ≤ 0.5 gal/flush. 4.303.1.3.1 – Single showerheads: ≤ 1.8 gpm @ 80 psi. 4.303.1.3.2 – Multiple showerheads: combined flow rate of all showerheads controlled by a single valve shall not exceed 1.8 gpm @ 80 psi, or only 1 shower outlet is to be in operation at a time. 4.303.1.4.1 – Residential lavatory faucets: maximum flow rate ≤ 1.2 gpm @ 60 psi; minimum flow rate ≥ 0.8 gpm @ 20 psi. 4.303.1.4.2 – Lavatory faucets in common and public use areas of residential buildings: ≤ 0.5 gpm @ 60 psi. 4.303.1.4.3 – Metering faucets: ≤ 0.2 gallons per cycle. 4.303.1.4.4 – Kitchen faucets: ≤ 1.8 gpm @ 60 psi; temporary increase to 2.2 gpm allowed but shall default to 1.8 gpm.
	Standards for plumbing fixtures and fittings
4.303.2	Plumbing fixtures and fittings shall be installed in accordance with the California Plumbing Code, and shall meet applicable standards referenced in Table 1701.1 of the California Plumbing Code.
	Outdoor potable water use in landscape areas
4.304.1	New residential developments shall comply with a local water efficient landscape ordinance or the current California Department of Water Resources' Model Water Efficient Landscape Ordinance (MWELO), whichever is more stringent.
Division 4.4 – MATERIAL CONSERVATION & RESOURCE EFFICIENCY	
	Rodent proofing
4.406.1	Annular spaces around pipes, electric cables, conduits or other openings in sole/bottom plates at exterior walls shall be closed with cement mortar, concrete masonry or a similar method acceptable to the enforcing agency to prevent passage of rodents.

