



Metropolitan Sewerage District

OF BUNCOMBE COUNTY, NORTH CAROLINA

Wastewater Allocation Request

Complete all appropriate items and return to:

MSD / Planning and Development
2028 Riverside Drive
Asheville, NC 28804

Attention: Kay Farlow

1) Person requesting allocation - (party to receive allocation letter)

Name: _____
Address: _____
Phone: _____
Company: _____

2) Name and location information

Name of project: _____
PIN #: _____
Street: _____

3) Scope of project and connection point with manhole number _____

Brief description of project: _____

Residential: # of unit's _____ # of bedrooms _____

Non-residential: # of employee's _____ # of seats _____ square footage _____

Estimate Discharge: _____ GPD * (100 gallons per bedroom) *

4) Connection information

Tap size: (circle) 4 6 8 Other _____

5) Water Source _____

Must provide the following information:

- A site plan showing properties to be served
- Plan showing proposed route to existing MSD sewer
- Connection point to MSD sewer and Manhole number

The Metropolitan Sewerage District will only consider gravity sewer extensions to the existing District sewerage system.

Return completed application and a **\$170.00** non-refundable check payable to **MSD of Buncombe County** to MSD Planning and Development, **Attention: Kay Farlow**.

The District reserves the right, in its sole and absolute discretion, to approve or decline all allocation approval requests.

Name: _____ Date: _____

Signed

Contact David Monteith @ 828-254-9646 if additional information is needed.

~Protecting Our Natural Resources~