## **CITY OF MERCER ISLAND**

## **COMMUNITY PLANNING & DEVELOPMENT**

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## **Residential Water Meter Sizing Worksheet**

Owner's Name:	DEB + TRAVIS LARSEN	Main Permit #
Site Address:	8557 85TH AVE SE	Water Permit #

	Number of Fixtures			Firstrag		
Fixture Type	New (For replacement, list as existing)	Existing	Total Fixtures	Fixture Units	To	otal Units
Bathtub or Combination Bath/Shower	0	3	2	x 4	=	8
3/4" Bathtub Fill Valve (Soaker Tubs)	0	1	0	x 10	=	0
Shower (per head)	5	1	6	x 2	=	12
Sink	2	7	9	x 1	=	9
Toilet	4	5	9	x 2.5	=	22.5
Bidet	0	0	0	x 1	=	0
Kitchen Sink	0	1	1	x 1.5	=	1.5
Dishwasher	1	1	2	x 1.5	=	3
Bar Sinks & Ice Makers	2	0	2	x 1	=	2
Clothes Washer	1	1	2	x 4	=	8
Laundry Sink	1	0	1	x 1.5	=	1.5
Drinking Fountain	0	0	0	x 0.5	=	0
Hose Bibs (first)	_		Γ	x 2.5	=	
Each additional	0	3	3	x 1	=	4.5
Lawn Sprinkler Irrigation/per head	0	10	10	x 1	=	10
Other:	0	0	0	x 0	=	0
			TO	TAL UNITS	=	82

For Official Use Only						
REQUIRED SERVICE SIZE						
Requirements are based per 2015 U.P.C., Chapter 6, Table 610.4						
Existing Meter Size:	Meter Number:					
Upsize: $\square$ Yes $\square$ No If yes the code requires:	□ 5/8" □ ¾" □ 1" □ 1½" □ 2" □ Larger:					
Map Page & Hydrant #:	Required Supply Line Size:					
Distance from meter to farthest	Required Service Line Size:					
Fixture outlet (in feet):	(from water main to meter)					
Known Static Pressure: (Otherwise use 65lb/in)	*REQUIRED METER SIZE:					
Height difference (in feet):	** Pressure Reducing valve required:   Yes   No					
Minus if Building Higher – x .5						
Building Design P.S.I.						

<sup>\*</sup>Meter installation **DEPOSIT** for these items. Additional charges may be incurred for time and materials

<sup>\*\*</sup>Pressure Reducing valve is required if the known water pressure is in excess of 80 psi.