



## CITY OF BLOOMINGTON UTILITIES

600 E Miller Drive, Bloomington, IN 47401

[www.bloomington.in.gov/utilities](http://www.bloomington.in.gov/utilities)

Phone: 812-339-1444

### Utility Project Review Application – Remodels/Renovations

- This form must be completed (front & back) and submitted to City of Bloomington Utilities for plan submission and review.
- The Site, Utility, and Plumbing Plans must accompany this form for project review to be initiated. If you do not have these items, please contact our office for further instructions.
- All documents should be emailed to CBU at [UtilitiesPlanReview@bloomington.in.gov](mailto:UtilitiesPlanReview@bloomington.in.gov). Typical review timeframes are 2-4 weeks depending upon each project's complexity and where they fall within the queue.
- If you have additional questions, please visit our website for more detailed information: [www.bloomington.in.gov/utilities/review](http://www.bloomington.in.gov/utilities/review).

Construction may not begin until an approval has been issued by City of Bloomington Utilities and any other applicable agencies.

**Project Name** \_\_\_\_\_ **Mon. Co. Permit #:** \_\_\_\_\_

**Project Location** \_\_\_\_\_

**Project Description** \_\_\_\_\_

(Check all that apply for your project)

Current Property Type:

☐ Commercial ☐ Industrial / Manufacturing ☐ Restaurant ☐ Brewery/Distillery ☐ Residential

Will there be a change of use associated with this project? ☐ No ☐ Yes; new type: \_\_\_\_\_

Exterior Property Changes Planned (Non-Utility Items Only):

☐ Building or Structure Addition / Pool / Deck / Fence ☐ Landscaping Changes ☐ Other \_\_\_\_\_

Existing Building Renovations Include:

☐ Change of Ownership ☐ Restaurant Remodel ☐ Code Compliance ☐ Fire Restoration/Rebuild  
☐ Grease Interceptor Installation ☐ Backflow Device Installation ☐ Changes or Updates to Existing Plumbing  
☐ Fire Line Installation ☐ Irrigation System Installation ☐ Service Upgrade (Increased Demand Needs)

**Applicant / Project Manager:**

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Engineering / Architect / Designer:**

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Property Owner / Developer:**

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**Contractor / Plumber / Other Interested Party:**

Company: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

(see reverse side)

## CITY OF BLOOMINGTON UTILITIES

**PLUMBING FIXTURE COUNT**

ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Are most of the fixtures listed, for public use? YES NO

Are water closets and urinal predominantly Flushometers? YES NO

<b>Pre-remodel # OF EACH</b>	<b>Post remodel # OF EACH</b>	<b><u>TYPE OF FIXTURE</u></b>
_____	_____	Bathroom Sink
_____	_____	Bathtub/Shower Combo
_____	_____	Bathtub only
_____	_____	Bar Sink
_____	_____	Bidet
_____	_____	Clothes Washer
_____	_____	Cuspidor
_____	_____	Direct line connection Coffee/Tea Maker
_____	_____	Dishwasher, residential
_____	_____	Dishwasher, Commercial
_____	_____	Disposal, Commercial Spray
_____	_____	Drinking Fountain
_____	_____	Fountain Drink Dispenser
_____	_____	Hose Bib (outside hose connect)
_____	_____	Ice Maker, residential
_____	_____	Ice Machine, Commercial
_____	_____	Kitchen Sink, residential
_____	_____	Kitchen Bay Sinks, (# of bays, Commercial)
_____	_____	Laundry Tub
_____	_____	Shower Head - shower stall only
_____	_____	Service/Mop Sink
_____	_____	Urinals, Pedestal
_____	_____	Urinals, Wall
_____	_____	Urinals, Tank
_____	_____	Toilet, (with tank)
_____	_____	Toilet, Flushometer (tankless)
_____	_____	Wash/Janitorial Sink

Please list, in GPM, any continuous demand needs and their purpose:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_