



COUNTY OF HANOVER
DEPARTMENT OF PUBLIC UTILITIES
P.O. BOX 470
HANOVER, VIRGINIA 23069
METER SIZING FORM

Customer _____ Address _____

Building Address _____ Type of Occupancy _____

Development Name _____ GPIN Number _____

Applicant _____

Title/Company _____ Daytime Phone # _____

I certify that the information on this form is true and correct to the best of my knowledge.

Domestic Demand Fixture		Fixture Value	No. of Ex. Fixtures	No. of Prop. Fixtures	Fixture Value
Bathtub			8 x (_____)	+ (_____)	= _____
Dental Unit			2 x (_____)	+ (_____)	= _____
Dishwasher			2 x (_____)	+ (_____)	= _____
Drinking Fountain			2 x (_____)	+ (_____)	= _____
Hose Connection/Spigot	1/2"		5 x (_____)	+ (_____)	= _____
Hose Connection/Spigot	5/8"		9 x (_____)	+ (_____)	= _____
Hose Connection/Spigot	3/4"		12 x (_____)	+ (_____)	= _____
Kitchen Sink			2.2 x (_____)	+ (_____)	= _____
Lavatory/Faucet			1.5 x (_____)	+ (_____)	= _____
Shower Head			2.5 x (_____)	+ (_____)	= _____
Toilet/Water Closet	flush valve		10 x (_____)	+ (_____)	= _____
Toilet/Water Closet	tank type		4 x (_____)	+ (_____)	= _____
Urinal	flush valve		5 x (_____)	+ (_____)	= _____
Utility Sink/Service Sink			4 x (_____)	+ (_____)	= _____
Washing Machine			6 x (_____)	+ (_____)	= _____
Other: _____			_____ x (_____)	+ (_____)	= _____
Other: _____			_____ x (_____)	+ (_____)	= _____
Other: _____			_____ x (_____)	+ (_____)	= _____
Combined Fixture Value Total					= _____

Domestic plus Fixed Demands: **Flow (gpm)**

Fixed Flow _____ = _____

Fixed Flow _____ = _____

Sum of Fixed Flows (A): = _____

Equivalent Fixed Flow for Fixture Count (B): = _____

Total Flow (A + B): = _____

Required Water Meter Size: = _____