

## 5. Appendices

### 5.1 Appendix A - Water Meter Sizing

- A. Determine the number and type of water fixtures needed and list on following form as appropriate.
- B. Determine the combined fixture value. Multiply the fixture values times the number of fixtures to obtain the Total Fixture Value for each type. Add all total fixture values and place answer in the space provided on the form.
- C. All other demands not listed in the sizing form shall be substantiated with data furnished by the Applicant's Engineer or his agent. If it is necessary to have a fixed demand or an irrigation demand, Applicant's Engineer or his agent must include information, in the appropriate location, on the water meter sizing form.
- D. In completing the water meter sizing form, all water demands necessary for the building(s) or its intended use must be included. When fixed flows are to be combined with flows determined by fixture values, the following procedures shall be utilized. Convert fixture values to flow using figure 4.4 or 4.5 from AWWA M22. Add the fixed flow with the flow determined from fixture values to determine total flow. Using figure 4.4 or 4.5 from AWWA M22, convert the total flow back to fixture units. Size the meter based on the County's meter sizing policy.
- E. The meter size necessary to serve a structure shall be determined on the basis of a fixture count. The fixture count to meter size equivalency is as follows:

<u>Meter Size</u>	<u>Fixture Count Value</u>
5/8"	0 - 50
1"	51 - 100
1-1/2"	101-250
2"	251 - 600
3" and larger	By Professional Engineer.

Meters three inches (3") and larger shall be sized by a licensed Professional Engineer. Meter sizing shall be in accordance with the requirements AWWA M22.

Department of Utilities, Spotsylvania County, Virginia  
Fill in all spaces

Customer \_\_\_\_\_ Address \_\_\_\_\_

Building Address \_\_\_\_\_ Type of Occupancy \_\_\_\_\_

Development Name \_\_\_\_\_ Tax Map No. \_\_\_\_\_ Parcel No. \_\_\_\_\_

Applicant \_\_\_\_\_ Signature \_\_\_\_\_

Title/Company \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

I certify that the information on this form is true and correct.

Applicant's Signature: \_\_\_\_\_

<u>Fixture</u>	<u>Fixture Value @ 35 psi</u>		<u>No. of Fixtures</u>	<u>Fixture Value</u>
Bathtub	8	x	_____	= _____
Bedpan Washers	10	x	_____	= _____
Combination Sink and Tray	3	x	_____	= _____
Dental Unit	1	x	_____	= _____
Dental Lavatory	2	x	_____	= _____
Drinking Fountain	1	x	_____	= _____
	- Cooler	1	x	_____
	- Public	2	x	_____
Kitchen Sink	- 1/2" Connection	3	x	_____
	- 3/4" Connection	7	x	_____
Lavatory	- 3/8" Connection	2	x	_____
	- 1/2" Connection	4	x	_____
Laundry Tray	- 1/2" Connection	3	x	_____
	- 3/4" Connection	7	x	_____
Shower Head (Shower Only)	4	x	_____	= _____
Service Sink	- 1/2" Connection	3	x	_____
	- 3/4" Connection	7	x	_____
Urinal	- Pedestal Flush Valve	35	x	_____
	- Wall Flush Valve	12	x	_____
	- Trough (2 Ft. Unit)	2	x	_____
Wash Sink (Each Set of Faucets)	4	x	_____	= _____
Water Closet	- Flush Valve	35	x	_____
	- Tank Type	3	x	_____
Dishwasher	- 1/2" Connection	4	x	_____
	- 3/4" Connection	10	x	_____
Washing Machine	- 1/2" Connection	5	x	_____
	- 3/4" Connection	12	x	_____
	- 1" Connection	25	x	_____
Hose Connection (Wash Down)	- 1/2"	6	x	_____
	- 3/4"	10	x	_____
Hose (50 Ft. Wash Down)	- 1/2"	6	x	_____
	- 5/8"	9	x	_____
	- 3/4"	12	x	_____
Other: _____	_____	x	_____	= _____
<b>Combined Fixture Value Total</b>	<b>= _____</b>			