



## WS-2: WATER DEMAND WORKSHEET

Updated: 4/14/2025

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**Instructions:** Complete this form with up-to-date, accurate information to the best of your knowledge. Upon completion and certification, return the form (along with **WS-1**, if required) to [servicerequests@crwater.com](mailto:servicerequests@crwater.com).

For the "Fixture Unit Worksheet", provide the number of new and existing fixture types that will be served by the requested meter in the "Quantity" column. For the "Fixture Units" column, multiply the "Quantity" by the associated "Fixture Unit Multiplier". The "Total Fixture Units" is the sum "Fixture Units". See notes for Flushometer valve fixture unit calculations. For services with fire suppression systems, swimming pools, irrigation, and/or other miscellaneous water demands, complete the "Miscellaneous Water Demand Worksheet" with required/proposed flows. For questions, please call (503) 722-9220.

<b>APPLICANT INFORMATION</b> <input type="checkbox"/> Same as <b>WS-1</b>		
Name(s):	Phone:	Cell:
Address:		Email:
Company/Organization (if applicable):		Co/Org Phone:

<b>FIXTURE UNIT WORKSHEET</b>					
Fixture Type	Quantity		Fixture Unit Multiplier <sup>5</sup>		Fixture Units
	Private	Public	Private	Public	
Bathtub or combination bath/shower			4.0	4.0	
w/ 3/4-inch fill valve <sup>1</sup>			10.0	10.0	
Bidet			1.0	1.0	
Clothes washer			4.0	4.0	
Dental unit, cuspidor			N/A	1.0	
Dishwasher, domestic			1.5	1.5	
Drinking fountain or water cooler			0.5	0.5	
Hose bibb, first			2.5	2.5	
Hose bibb, additional <sup>2</sup>			1.0	1.0	
Mobile home, each			12.0	N/A	
Sink, bar			1.0	2.0	
Sink, clinical faucet			N/A	3.0	
Sink, kitchen or laundry			1.5	1.5	
Sink, bathroom			1.0	1.0	
Sink, service or mop basin			1.5	3.0	
Shower, standalone (per head)			2.0	2.0	
Toilet, gravity or flushometer tank <sup>3</sup>			2.5	2.5	
Toilet, flushometer valve <sup>4</sup>			X	X	
Toilet, gravity (>1.6 GPF) <sup>3</sup>			3.0	5.5	
Urinal, flush tank			2.0	2.0	
Urinal, flushometer valve <sup>4</sup>			X	X	
Other:					
Other:					
<b>Total Fixture Units:</b>					

**Notes:**

- <sup>1</sup> Most baths are on a 1/2-inch fill valve
- <sup>2</sup> The quantity of additional hose bibbs is the total number of hose bibbs minus one.
- <sup>3</sup> Most gravity toilets are 1.6 GPF (gallons per flush).
- <sup>4</sup> Use the Flushometer Valve Fixture Units table below to fill the Fixture Units cells for these two rows.
- <sup>5</sup> All Fixture Units are based on the most current version of the Oregon Specialty Plumbing Code (OSPC).

<b>FLUSHOMETER VALVE FIXTURE UNITS</b>		
No. of Flushometer Valves	Total Fixture Units <sup>5</sup>	
	Urinals	Toilets
1	20	40
2	35	70
3	45	90
4	53	105
5 or more	58 + 5 for each additional fixture	115 + 10 for each additional fixture

<b>MISCELLANEOUS WATER DEMAND WORKSHEET</b>		
<input type="checkbox"/> <b>Fire sprinkler system</b> – required flow to each sprinkler head (                  GPM), multiplied by the number of sprinkler heads in the largest room (                  ), for total proposed flow:		<b>GPM</b>
<input type="checkbox"/> <b>Swimming pool/spa/tank</b> – filled by: <input type="checkbox"/> hose bibb, or <input type="checkbox"/> dedicated water line. If filled by hose bibb, no additional water demand is assessed. If dedicated water line, total proposed flow:		<b>GPM</b>
<input type="checkbox"/> <b>Irrigation</b> – (A) Measured flow rate for largest separate circuit of irrigation system, or (B) number of sprinkler heads on largest separate circuit (                  ), multiplied by the rated flow per head (                  GPM), for total proposed flow:		<b>GPM</b>
<input type="checkbox"/> <b>Other:</b> _____ – total proposed flow:		<b>GPM</b>
<b>Notes:</b>		<b>Total Miscellaneous Demand:</b>
		<b>GPM</b>

<b>CERTIFICATION</b>
<input type="checkbox"/> I certify that the above information is accurate to the best of my knowledge and is representative of the TOTAL water demand on the requested meter. I also certify that the fixtures and water demand identified above will conform to the associated building and/or plumbing permit and that if, in the future, I intend to create any significant new water demand on the property, I will inform CRW prior to creating the demand. <b>Date:</b> _____