Residential Water Submetering Exemption Application Form



This form shall be completed by San Francisco Department of Building Inspection (DBI) site or building permit applicants constructing new multi-family residential buildings that may be exempt from the Residential Water Submetering requirements per Senate Bill 7. For more information about Residential Water Submetering requirements in San Francisco, visit www.sfwater.org/reqs/submetering.

Applicant Information

Applicant's Name:		Site Address:	
DBI Permit Application #:		Phone Number with Area Code:	
DBI Permit Application Date:		Email Address:	
Exemption Criteria Please indicate which of the following exemption criteria, per California Water Code Section 537,			
Paragraph a, your project meets:			
	☐ 1. Low-income housing		
	For purposes of this paragraph, "low-income housing" means a residential building financed		
	with low-income housing tax credits, tax-exempt mortgage revenue bonds, general obligation		
	bonds, or local, state, or federal loans or grants, for which the rents of the occupants in lower		
		79.5 of the Health and Safety Code, do not exceed	
	•	atory agreements pursuant to the terms of the	
		n not less than 90 percent of the dwelling units	
	within the building are designated for occupancy by lower income households, as defined in Section 50079.5 of the Health and Safety Code.		
	Section 30079.3 of the Health and Safety Code	z.	
	2. Housing at a place of education		
	- ·	lding Standards Code (Title 24 of the California	
	Code of Regulations).		
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	3. Long-term health care facilities As defined in Section 1418 of the Health and Safety Code.		
	As defined in Section 1418 of the Health and S	safety Code.	
	4. Time-share property		
	As defined in subdivision (aa) of Section 1121	2 of the Business and Professions Code.	
	5. Residential care facilities for the elderly		
	As defined in Section 1569.2 of the Health and	d Safety Code.	

Additional Explanation		
Please provide additional information or documentation, if available, to support your request for an exemption as described in the Exemption Criteria.		
Applicant's (or Representative's) Signature: Date:		
Please return this form and any additional documentation to the address below:		
SFPUC Capacity Charge Program c/o Department of Building Inspection 1660 Mission St., 4 th Floor San Francisco, CA 94103		
Or email to: capacitycharges@sfwater.org		
For SFPUC Use Only		
Date Received:		
Approved? ☐ Yes ☐ No If approved with modification, please explain:		
Maria shaduulaasa suulainu		
If rejected, please explain:		
Staff Initials/Date:		