



If your project requires a utility system improvement that you have grounds to dispute, you can request a Determination Review, pursuant to [Director's Rule ENG-430.1](#).

### CRITERIA FOR REQUESTING DETERMINATION REVIEW

The criteria for requesting a Determination must directly relate to a specific City of Seattle requirement. Additionally, the applicant must have legal standing with the project. Accepted criteria include:

- Engineering infeasibility with documented professional engineering support.
- Requirement issued in error. Provide substantive facts.
- Last lot exemption (for water main extensions only pursuant to [CS-101.5.C.3](#))

Other reasons will be rejected.

### GENERAL INFORMATION

- Incomplete submittals will be rejected.
- Requests are permitted for 18 months from the date of the Water Availability Certificate (WAC) or Pre-Assessment Report (PAR) issuance.
- Submittals are **due by noon on Monday** for consideration in the next Determination Review meeting.

**SUBMIT YOUR APPLICATION** – Use one of the following options:

- Email signed pdf copy: [SPUWaterAvailability@seattle.gov](mailto:SPUWaterAvailability@seattle.gov)
- Hand Deliver: Seattle Municipal Tower – 700 Fifth Ave, Suite 2748, Seattle, WA 98101
- Mail: Development Services Office, Seattle Public Utilities, PO Box 34018, Seattle, WA 98124

### APPLICANT & PROJECT INFORMATION

Project Address

Zoning

King County Parcel Number

Total Number of Dwelling Units

↓	PROPERTY OWNER	PROJECT CONTACT <i>(If different from Property Owner)</i>	Design Professional
Company			
Name			
Mailing Address			
Telephone			
Email			

**PROJECT INFORMATION**

**System Improvement Utility Type**

**Drainage and Wastewater (DWW)**

- Combined Sewer Main
- Public Storm Drain
- Sanitary Sewer Main

**Water System Improvement**

- Valve
- Water Main Extension
- Other

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Related Pre-Assessment Report (PAR)

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If other, describe.

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New plus Replaced Total Hard Surface (sf)

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Related Water Availability Certificate (WAC)

**Right-of-Way Information:**

<b>Designation:</b>	Alley	Arterial	Residential	Other
<b>Pavement Type:</b>	Asphalt	Asphalt over Concrete	Concrete	Other

**System Improvement Requirement for Project**

**Proposed Alternative Solution(s)**

**Reason(s) for Request**

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Signature of Property Owner

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Printed Name

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Date