Water Use Survey (Interior) Audit Date: _____ Address: ______ Phone: _____ Name: ______ Service Area: Marina ___ Fort Ord Single Family Multi Family Commercial Industrial Institutional Mixed Number bathrooms: 1 1 ½ $2 \square$ 2 ½ Other TYPE OF FIXTURE # FIXTURES OTHER QUANTITY / BRAND / COMMENTS Other 1 2 3 Brand: UHET Toilet (1.1 gpf or less) Brand: HE Toilet (1.28 gpf) Brand: LF Toilet (1.6 gpf) Brand: Other Toilet (over 1.6 gpf) Bath Sink Urinal Water-Free Urinal Bathtub w/ Showerhead Bathtub wo/ Showerhead Shower Stall Dishwasher Kitchen Sink **Utility Sink** Bar Sink HE Clothes Washer Older Clothes Washer Hot Water Pump Fountain / Water Feature Outdoor Pool / Hot Tub DO NOT WRITE IN THIS SECTION - FOR MCWD USE ONLY # Showerheads provided # Aerators provided

Meter Number: _____ Meter Reading: ____ Leak?: Yes ___ No ___

Water Use Survey Continued

OUTDOOR USE

Front Yard

Do you have established landscaping? Yes No Existing, yet abandoned
Automatic irrigation timer? Yes \(\square\) No \(\square\)
Lawn? No Yessquare feet
Lawn Irrigation type: Handwatered Sprinklers Other please specify:
Shrubs? No Yes square feet
Shrubs Irrigation type: Handwatered Sprinklers Other please specify:
Describe Landscape:
Existing Watering Schedule: (example: waters 3x a week, 10 min per irrigation event)
Back Yard
Do you have established landscaping? Yes No Existing, yet abandoned
Automatic irrigation timer? Yes No No
Lawn? No Yessquare feet
Lawn Irrigation type: Handwatered Sprinklers Other please specify:
Shrubs? No Yessquare feet
Shrubs Irrigation type: Handwatered Sprinklers Other please specify:
Describe Landscape:
Existing Watering Schedule: (example: waters 3x a week, 10 min per irrigation event)
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