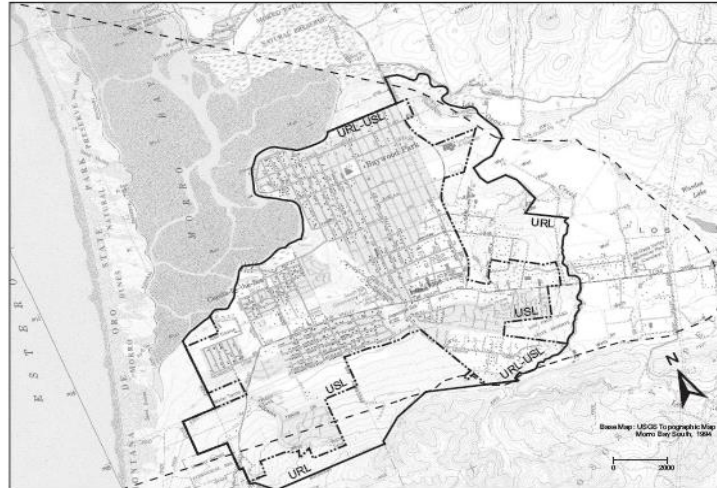




## Title 8: Los Osos Groundwater Basin Retrofit on Sale Ordinance



In 2008, the Board of Supervisors approved retrofit-on-sale ordinance for the Los Osos Groundwater Basin. The ordinance addresses groundwater basin resource constraints by requiring plumbing retrofits of older, non-conserving toilets and showerheads with those that are water efficient before buildings can be sold.

The Board of Supervisors approved changes effective March 10, 2015 to fixture requirements under the program. Those changes are reflected below.

Sellers of homes that use water from the Los Osos Groundwater Basin must submit verification to the department of Planning and Building that plumbing fixtures meet the following requirements. To find out if a property is within these areas, visit:

<http://www.slocounty.ca.gov/Departments/Planning-Building/Information-Systems/Services/Land-Use-View.aspx>. Open **Land Use View** and under layers, click Planning, then click the plus for 'Impacted Groundwater Basins'. Click the plus for 'BOS Determined Basins at LOS III.' Make sure that 'Los Osos Groundwater Basin' is selected. Zoom in on Los Osos to see if the property is within the shaded area.

Existing Toilets	Replacement Required? (1.6 or less gpf)
Greater than 1.6 gpf	Yes
Less than or equal to 1.6 gpf	No
Existing Showerheads	Replacement Required (2.0 or less gpm)
Greater than 2.0 gpm	Yes
Less than or equal to 2.0 gpm	No
Faucet Aerators	Must not exceed 1 gpm

## Title 8: Los Osos Groundwater Basin Retrofit on Sale Ordinance

---

### Retrofit Verification Process

1. Prior to transfer of title, a Title 8: Retrofit Verification Form must be submitted to the Department of Planning and Building. All sections must be filled out correctly for the retrofit certificate to be issued.
2. **Part 1** of the Retrofit Verification Form must include:
  - a. Date of Inspection;
  - b. Property Address;
  - c. Assessor Parcel Number<sup>1</sup>;
  - d. Seller's First & Last Name;
  - e. Agent Name & Phone Number;
  - f. Inspector's Printed First & Last Name;
  - g. Inspector's Phone Number; and
  - h. Inspector's License # or Certification.
3. When filling out **Part 2** of the form, circle whether each of the Existing Toilets and Showerheads are low **flow**:
  - a. **If low flow**, write the existing gallons per flush (gpf) or gallons per minute (gpm) for the respective toilet and showerhead.
  - b. **If not low flow**, write the existing gpf or gpm for the respective toilet and showerhead, and then write the flow rate of the newly installed low flow fixture.
4. All retrofitted toilets must have a flow rate less than or equal to 1.6 gpf; all retrofitted showerheads must have a flow rate less than or equal to 2.0 gpm; and all retrofitted faucet aerators must have a flow rate equal to 1.0 gpm or less.
5. Circle whether a faucet aerator is present on each of the sinks and the respective flow rate. If a faucet aerator is not present or over 1gpm, replace and state the new flow rate.
6. If a property contains more than 2 bathrooms, a second Retrofit Verification Form must be submitted with the flow rates of the fixtures for each additional bathroom.
7. The Title 8: Retrofit Verification Form must be completed and signed by either a licensed plumber or a licensed home inspector.
8. The form must be submitted to: [waterprograms@co.slo.ca.us](mailto:waterprograms@co.slo.ca.us).
9. The department will approve the information and provide the Seller or Agent, via email, with a Title 8: Retrofit Certificate.

---

<sup>1</sup> Assessor's Parcel Number can be found by searching the property address at [www.sloplanning.org/PermitView/MapSearch](http://www.sloplanning.org/PermitView/MapSearch).

## Title 8: Los Osos Groundwater Basin Retrofit on Sale Ordinance

### Los Osos Title 8: Retrofit Verification Form

#### PART 1

<b>Date of Inspection:</b>	<b>Seller's Name:</b> (Printed First & Last)
<b>Property Address:</b>	<b>Assessor's Parcel Number:</b>
<b>Agent's Name:</b> (Printed First & Last)	<b>Agent's Phone Number:</b>
<b>Inspector's Name:</b> (Printed First & Last)	<b>Inspector's Phone Number:</b>
<b>Inspector Type:</b> Plumber / Home Inspector (Circle One)	<b>License #:</b>

#### PART 2

Bathroom #1			
<b>Existing Toilet Low Flow?</b>  YES / NO	_____ gpf (Must replace if greater than 1.6 gpf)	<b>New Toilet</b>	_____ gpf (Must be 1.6 gpf or less)
<b>Existing Showerhead Low Flow?</b>  YES / NO	_____ gpm (Must replace if greater than 2.0)	<b>New Showerhead</b>	_____ gpm (Must be 2.0 gpm or less)
<b>Faucet Aerator Present?</b>  YES / NO	_____ gpm (Must replace if greater than 1.0)	<b>New Faucet Aerator</b>	_____ gpm (Must be 1.0 or less)
Bathroom #2			
<b>Existing Toilet Low Flow?</b>  YES / NO	_____ gpf (Must replace if greater than 1.6 gpf)	<b>New Toilet</b>	_____ gpf (Must be 1.6 gpf or less)
<b>Existing Showerhead Low Flow?</b>  YES / NO	_____ gpm (Must replace if greater than 2.0)	<b>New Showerhead</b>	_____ gpm (Must be 2.0 gpm or less)
<b>Faucet Aerator Present?</b>  YES / NO	_____ gpm (Must replace if greater than 1.0)	<b>New Faucet Aerator</b>	_____ gpm (Must be 1.0 or less)

E-MAIL COMPLETED FORM TO: [waterprograms@co.slo.ca.us](mailto:waterprograms@co.slo.ca.us)